

LAKE COUNTY GOVERNMENT ASSET STATUS CHANGE FORM

Send this completed form with authorized signatures to
eluning@lakecountyfl.gov or Fixed Asset Section, County Warehouse, CR #473


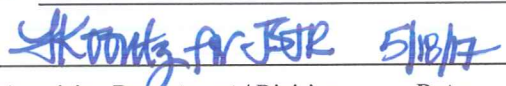
SECTION I - Preparer Information (required on all requests)

Name Karen Burt Date: 5/18/2017
 Telephone 343-6439 E-mail: kburt@lakecountyfl.gov

SECTION II - Asset Information (required on all requests)

Asset Number 23835 Asset Description 2006 New Holland Cab Tractor TL100A
 Dept/Division Public Works/Road Ops / MA II Serial No. HJS050133
 Asset Condition Fair Current Vehicle Mileage/Hours 3,150 HRS

SECTION III - Transfer Request (MUST have both releasing and acquiring signatures to be completed)

Transfer From: Dept/Division <u>Public Works/Road Ops/MA II</u>  <u>SKronitz for JSR</u> <u>5/18/17</u> Releasing Department / Division Date Authorized Signer	Transfer To: Dept/Division <u>Public Works / Solid Waste / Landfill Operations</u>  <u>SKronitz for JSR</u> <u>5/18/17</u> Acquiring Department / Division Date Authorized Signer
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SECTION IV - Disposal Request (check the appropriate request for disposal of asset)

Surplus* _____ Item is no longer useful to this department. Please see special handling instructions below.

*Detailed description of computers and related items need to be sent to ITSurplus@lakecountyfl.gov

*Vehicles are to be transferred to Fleet Surplus using Section III, who will determine final status.

- Lost _____ Must be accompanied by Missing Item Report
- Trade-in _____ Estimated Trade In Value \$ _____
- RTV _____ Reason for return to vendor _____
- Cannibalized _____ To be used as parts for similar assets
- Donation _____ Donation Recipient _____
- Stolen _____ Must be accompanied by police report
- Wrecked _____ Must be accompanied by police report
- Destroyed _____ Must be accompanied by Property Damage Report

Reason Requesting Surplus _____

Signature For Surplus	Date	Fixed Asset Section	Date
Custodian Only			

For Fixed Asset Use Only
 BCC Approval Date: _____ Disposal Method: _____