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 1 - Prepar	er Information (required on all request	s)			
Name	Karen Burt		Date:	4/27/2016	
Telephone	343-6439		E-mail: kbu	t@lakecountyfl.gov	
SECTION II - Asset	Information (required on all requests)				
Asset Number	25875	Asset Description		50 4X4 PICKUP TRUCK	
Dept/Division	Public Works/Road Ops/MA2	Serial No.	1FTSX2151	09EA32019	
Asset Condition	GOOD	Current Vehicle M	ilenge/Hours	146,340 miles	
GECTION III T	of Decreet AMST to a both selection	a and assulutor standard	ese to be completed)		
SECTION III - Transfer Request (MUST have both releasing and acquiring signatures to be completed) Transfer From: Transfer To:					
	utilic Works/Road Ops MA2	Dept/Division	1 n 111	Solid Waste/Landfill Ops	
Depublision	11111	Jes	oc M	2/2/11	
P.I. de Pers	72/6	- W	Acquiring Departmen	at / Division Date	
	n'tment / Division / Date izen Signer		Authorized		
SECTION IV - Disno	osal Request (check the appropriate req	uest 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					
	be transferred to Fleet Surplus using S				
Lost	Must be accompanied by Mis	ssing 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	Wrecked Must be accompanied by police report				
Destroyed Must be accompanied by Property Damage Report					
Reason Requesting S	Surplus	and the second s			
Continue of the Continue of th					
Signature For Surplus Date Fixed Asset Section Date					
Custodi	ian Only				
B. P. 14 P. 01					
For Fixed Asset Use Only					
BCC Approval Date:		Dis	posal Method:		