



REPORT OF SURPLUS MOTOR VEHICLES AND MOTORIZED EQUIPMENT

SURPLUS PERSONAL PROPERTY
BLDG. 18, THE GOV. W. AVERELL HARRIMAN
STATE OFFICE BUILDING CAMPUS
ALBANY, NY 12226

Submit original signed form only, along with title.

FIXED ASSET NUMBER

USE ONE OF THESE FORMS FOR EACH VEHICLE REPORTED

REPORTING AGENCY NAME & ADDRESS	LOCATION OF SURPLUS VEHICLE: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
TELEPHONE NO. _____	CONTACT _____
TELEPHONE NO. _____	TELEPHONE NO. _____

YEAR _____ MAKE _____	<input type="checkbox"/> SEDAN <input type="checkbox"/> VAN
MODEL _____ COLOR _____ CYLINDERS _____	<input type="checkbox"/> STATION WAGON
VIN _____	<input type="checkbox"/> TRUCK _____
STATE IDENT. NO. _____	<input type="checkbox"/> OTHER _____

THE ODOMETER READING _____, IN ACCORDANCE WITH FEDERAL & STATE LAWS REFLECTS THE ACTUAL MILEAGE of the vehicle unless one of the following statements is checked:

The actual mileage "Exceeds Mechanical Limits" of the odometer (e.g., over 99,999 miles) The reading is "Not the Actual Mileage".

<input type="checkbox"/> OPERATING	<input type="checkbox"/> NON-OPERATING		
<input type="checkbox"/> AUTO TRANS.	<input type="checkbox"/> POWER BRAKES	<input type="checkbox"/> POWER WINDOWS	<input type="checkbox"/> AIR CONDITIONING
<input type="checkbox"/> STAND. TRANS.	<input type="checkbox"/> POWER STEERING	<input type="checkbox"/> RADIO	<input type="checkbox"/> OTHER _____

REMOVAL OF ANY PARTS FROM THE EQUIPMENT IS **FORBIDDEN** WITHOUT WRITTEN AUTHORIZATION FROM THE BUREAU OF SURPLUS PERSONAL PROPERTY.

DEFECTS (Please be as specific as possible)

BODY DAMAGE _____

MECHANICAL DEFECTS _____

MISSING PARTS _____

THE PERSONAL PROPERTY LISTED ABOVE IS NO LONGER REQUIRED BY THIS AGENCY AND THE AGENCY DECLARES, WITH RELATION TO ENVIRONMENTAL CONSERVATION LAW, ARTICLE 27 AND 6NYCRR PART 371, THAT SUCH LISTED PROPERTY IS NOT, AND DOES NOT CONTAIN HAZARDOUS WASTE, PESTICIDES, OR RADIOACTIVE MATERIALS AND I CERTIFY THAT ITS CONDITION AND THE ODOMETER INFORMATION IS ACCURATELY REPRESENTED ABOVE.

SIGNATURE _____	Funds from which items (s) purchased: <div style="border: 1px solid black; height: 20px;"></div>
(PLEASE TYPE) _____	
(NAME)	(TITLE)
	(DATE)