



CAMPUS REUSE FORM

OFFICE OF THE ASSOCIATE VICE PRESIDENT FOR BUDGET AND ANALYTICS PROPERTY MANAGMENT

Department Name & Organization Departmet #		Requester		Requester Email
Dept. Supervisor			Email of Dept. Supervisor	
REUSE LOCATION: BUILDING /ROC	DM			
A. UNT Property # (If applicable)	B. Description			
By signing this form you are authorizing the return of items to your department and location as designated on this form				

Keep a copy of this form for your records.

Surplus Representative -Sign

Requester from Department-Print Date placed on hold Requester from Department- Sign

> Surplus Representative-Print Date sent to Deptartment

Your Dept. Supervisor will receive an e-mail from surplus within 3 working days of receipt acknowledging transfer of the asset(s) to your Organization/Department Please review and save this final e-mail for your records.