



HAYWARD UNIFIED SCHOOL DISTRICT

Building a Culture of Success



SURPLUS PROPERTY DISPOSAL REQUEST FORM

The items listed below are excess to the School / Department needs and appropriate removal and disposal is requested.

School Site / Location:				Date:	
Contact Name:			Phone:		
SURPLUS ITEM DETAIL					
ITEM	HUSD Asset #	Description (include manufacturer, model, serial number, etc.)			Works? Y / N
1					
2					
3					
4					
5					
6					
7					
"HUSD Equipment Disposal List" is attached with more items : <input type="checkbox"/>Yes <input type="checkbox"/>No					
Reason above item(s) are Surplus (explain why you can no longer use them):					
Comments on condition or repairs needed:					
Current location of Items:					
Special instructions:					
APPROVALS					

Principal/Director Signature	Date	Technology Director Signature	Date
Board Approval	Date	Purchasing Approval	Date

INSTRUCTIONS:	
1) Use this form for requesting surplus and disposal of all items EXCEPT vehicles or instructional materials.	6a) IF computers or printers are included: Forward the completed form to Tammy Koning in EIT (Technology). Once approved, EIT will forward the form to Purchasing.
2) List each item individually.	6b) IF there are no computers or printers: Forward the completed form directly to Purchasing.
3) If you have more items, complete and attach "HUSD equipment disposal list".	7) If required, Purchasing will submit to the Board at the next available meeting to declare items surplus and approve disposal.
4) Fill in HUSD Asset number, complete description (include make, model, Serial No., etc) and indicate if the item still works.	8) Submit Work Order Request for a pick up.
5) Approval and signature of Principal/Director is required.	9) Once approved, a pickup will be scheduled by the Purchasing Dept.

DISPOSITION COMMENTS (PURCHASING USE ONLY)		
Site Pick Up Date:	Method of Disposal:	Disposal Date:
Comments:		



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HUSD Equipment Disposal List

(MUST BE attached to an approved Surplus Property Disposal Request Form)

School / Department:	Date:	Work Order #:
Name:	Phone:	Page ____ of ____

Comments:

Item	DESCRIPTION: i.e. monitor, printer, etc.	MFGR	MODEL	LOCATION	SERIAL #	HUSD Tag #	REASON FOR DISPOSAL
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

INSTRUCTIONS:

1) Use this form as an attachment to the **SURPLUS PROPERTY DISPOSAL REQUEST FORM** when you have more than 7 items.