

Property Disposition Request

Email completed form to surplus.services@state.mn.us or fax to 651-639-4026.

Department/Agency:		Division:		Section:		Date:	
Address:		City, State, Zip Code:		Contact Person:		Phone:	
Recommended Disposition:		<input type="checkbox"/> To Surplus Services		<input type="checkbox"/> Transfer		<input type="checkbox"/> Sale	
				<input type="checkbox"/> Recycle/ Scrap		<input type="checkbox"/> Other	
Other Instructions:							
General use classification of property: (See page 2 if any items are computers with hard drives)							
Item	Quantity	Complete Description*				Condition	Estimated Value
Speed Type				Fin Dept			
*Asset number, weight, dimensions, vehicle identification number, etc. I certify that this is state-owned property and is not subject to any lien, restriction or other encumbrance.				Fund			
				Account			
				Sub			
				Appr ID			
				Project ID			
Authorized Signature		Title		Date		PC Bus. Unit	
Surplus Services Use Only							
				Disposition Date:			
				Funds Deposit Date:			
				Surplus Services Authorization:			

Certification of Data Removal from Surplus Computers

Hard drives of surplus computers must be sanitized in accordance with
OET Sanitization and Destruction Standards 6/01/2010.

	Computer Serial Number	Software Used
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		

I hereby certify that the computers identified above have had the hard drive sanitized in accordance with the OET Sanitization and Destruction Standards.

Name

Date

Signature

Agency