

ASSET RETIREMENT (DISPOSAL) FORM

(This form must be completed whenever any fixed asset is disposed of or otherwise removed from service.)

	DISPOSED OR RETIRED FROM:
Department:	
Location:	

EQUIPMENT DETAILS:
Asset #: _____ Make/Model #: _____
V.I.N. or Serial #: _____ Number of Miles or Hours: _____
Description:
Means of Disposal: (to be auctioned, was traded-in, was scrapped, etc.)
Date on which asset was taken out of service: _____

Signature of Department Head: _____ Date: _____
Additional Comments and/or Disposal Details:

CITY OF DURANT-CITY CLERK AND CITY TREASURER OFFICE USE ONLY
Form Received from Department By: _____ Date: _____
Disposal Complete in the Following Records (initial and date)
Insurance: _____ Fixed Assets: _____ General Ledger: _____
G.L. Fund and Department Numbers: _____