Dartmouth College
Procurement Services
Materials Management / Surplus Property
7 Lebanon Street
Suite 313
Hanover, NH 03755
Phone 603-646-2149

Dartmouth College Materials Management Disposal Request Form

This Form must be completed whenever Dartmouth College equipment, property or assets will be picked up for recycling or disposal. All equipment/assets are to be processed through the Office of Procurement Services. Two signatures are required for this process Staff/PI and Department Admin / Head of the Department. Once the form is completed, please send the form to materials.management@dartmouth.edu

<table>
<thead>
<tr>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ___________________</td>
</tr>
<tr>
<td>Phone #: ___________________</td>
</tr>
<tr>
<td>Building Name: ___________________</td>
</tr>
</tbody>
</table>

Reason for desired disposal (e.g., faculty move, item no longer needed, etc.):

Account for removal charges (include chart string):

Date:

<table>
<thead>
<tr>
<th>Equipment Information #1</th>
</tr>
</thead>
</table>
| Description of equipment (or attach a spreadsheet with relevant information for each piece if multiple pieces):

Make: ___________________ | Model: ___________________

Serial #: ___________________ | Dartmouth Tag Number: ___________________

Dartmouth PI: ___________________ | Purchase Price and Year Purchased: ___________________

Current Market Value: ___________________

Additional Items: ___________________ | Notes: ___________________

Grant funded? ☐ YES (if yes, provide sponsor name and grant #): ___________________

☐ NO (if no, describe source of funds: ___________________

<table>
<thead>
<tr>
<th>Equipment Information #2</th>
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</table>
| Description of equipment (or attach a spreadsheet with relevant information for each piece if multiple pieces):

Make: ___________________ | Model: ___________________

Serial #: ___________________ | Dartmouth Tag Number: ___________________

Dartmouth PI: ___________________ | Purchase Price and Year Purchased: ___________________

Current Market Value: ___________________

Additional Items: ___________________ | Notes: ___________________

Grant funded? ☐ YES (if yes, provide sponsor name and grant #): ___________________

☐ NO (if no, describe source of funds: ___________________
If more than two units, please enclose a Spread Sheet

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Serial Number</th>
<th>Dartmouth Tag Number</th>
<th>Building</th>
<th>Rm.</th>
<th>Additional Items</th>
<th>Notes</th>
</tr>
</thead>
</table>

**Name:**
__________________________________________

**Dartmouth School:**
__________________________________________

**Phone #:**
__________________________________________

**Hinman Mail Box #:**
__________________________________________

**Building Name:**
__________________________________________

**Room #:**
__________________________________________

**Reason for desired disposal (e.g., faculty move, item no longer needed, etc.):**
__________________________________________

**Account for removal charges (include chart string):**

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**Required Approvals**

**#1 Signature of Faculty/Staff Member requesting transfer (first signature required):**

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Name:</th>
<th>Title:</th>
<th>Date</th>
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**#2 Signature of Department Admin/Department Chair (second signature required):**

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Name:</th>
<th>Title:</th>
<th>Date</th>
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