# LEVY COUNTY REPORT OF SURVEY ADDITION / DELETION

ASSET	#	
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Accounta	able Of	ficer			Dept. Contact			
Dept. CO	DE		De	pt		Phone	#	
AD1 Any new Minutes			ve a copy of the in	EQUIPMENT		I BOARD APF	ROVED items,	submit a copy of the Board
Purchase	ed from			Date .		<u>.</u>	FOR ACCOUN	NTING PURPOSES ONLY
Name of	Item			Make			DEPR	
Serial # _				Model #			NO DEPR.	
Price				Freight Cost			ASSET TYPE	PE
Ck #		In	voice #	P.O. #				
Does the Has soft	equipr ware/da	nent need to ta on all elec	be picked up by Ma tronic devices/med	om accountability fo aintenance Personne lia below been prope	el? erly destroyed	Yes/wiped? Yes	□ No □	
Asset	t #	Expensed		DESCRIPTION		DATE ACQUIRED	ITEM COST	ACCOUNTING PURPOSES ONLY DISPOSITION
□ Dama □ Dept. □ Trade □ Casua □ Other □ thereb	yed – A ged reques in – <u>P</u> alty Los r Dispos y cert	dvise Details  Worn-out sts cannibaliz  wrchase Orde s (Hurricane, sition (Specif	by attachment:  Obsolete  cation authorization  or Number of New F  Fire, etc.)  Im  y)  above is a true	Purchased Item Requestream Properly Disposed of the complete and complete	eded  Return oval if required <u>uired</u> P.O. # of  Scrappe	ned to vendor I signature d	- Attach Credit	ITEM GOING TO AUCTION
			FOR COUNTY M	AINTENANCE SESRVI	CES ONLY – DO	NOT WRITE IN	THIS SPACE	
			ORAGE / WAREHOUS	SE UNIT#				

Department retain copy -- Forward Original to Levy County Clerks Office 3/13

The Asset Forms were created for department and department heads to get a better accountability of the County Assets.

#### Addition/Deletion form or AD1.

- 1. Asset # will be assigned to item when received by Asset Clerk.
- 2. **Accountable Officer**, is the Department Head.
- 3. **Dept. Contact** is the person in that dept. most likely handling inventory.
- 4. **Dept. ID#** Your department number, if you don't know it just ask asset clerk.
- 5. Your Department name
- 6. **Phone #**
- 7. Equipment Addition is any new Asset Item that is \$1000.00 and up.
- 8. <u>In House Inventory</u> Items that are \$300.00 to \$999.99 also require an **AD1** for expense record only and should be added to In House Inventory.
- 9. Note that new purchases must have copy of signed invoice or bill plus a copy of the purchase order turned in with this form if Board Approved Purchase, attach copy of BOCC minutes.
- 10. **Purchased from & date**: is the company that the item was purchased from and the date of purchase.
- 11. Name of item, the make.
- 12. Must have serial number, the model number.
- 13. **Price** excluding tax.
- 14. Freight Cost.
- 15. Check # will be filled in by Asset Clerk
- 16. **Invoice** #
- 17. P.O. # is the BOCC's P.O. Number.

#### **Equipment Deletion or DL1**

- 1. Does equipment need to be picked up, check one.
- 2. Has software/data been **destroyed/wiped**? Check one.
- 3. **IT Personnel** must sign if #3 if yes.
- 4. Asset #: All assets should have an Asset Bar Code and number on it.
- 5. **Expensed**: Assets \$300.00 to \$999.00.
- 6. **Describe** the asset.
- 7. **Date acquired**, this information will be on your initial purchased forms.
- 8. <u>Item Cost</u>, this information should also be on your initial purchased forms.
- 9. Accounting Purposes For Asset Clerk Only
- 10. **Destroyed** Give Details by Attachment; If used for parts, state where asset is stored.
- 11. <u>Select One</u>: Damaged, Worn out, Obsolete, Operative but unneeded. Returned to vendor Attach Credit Memo
- 12. Department <u>requests cannibalization</u> authorization- Dept. Head signature is required IT Tech signature required
- 13. **Trade In** Purchase Order Number of New Purchased Item Required.
- 14. <u>Casualty Loss</u> i.e. Hurricane, Fire, Traffic Accident etc. <u>Specify brief note of incident and if</u> it was an accident, or stolen, attach a Police report.
- 15. Other Disposition Use for Casualty loss notation.
- 16. Accountable Officer must sign and date.
- 17. County Maintenance only will fill out this area.
- 18. Asset will be sent to storage unit. State which unit.
- 19. Person taking item to storage and date.
- 20. Regarding this form Department will retain signed copy Forward signed Original to Levy County's Inventory Department Asset Mgr

# TRANS1

# LEVY COUNTY REPORT OF TRANSFER OF PROPERTY

### To be used in all cases of transfer between Accountable Officers

The following items of tangible personal property have been transferred as indicated:

TRANSFERRING		RECEIVING	
OFFICE		OFFICE	
Department Name		Department Name	
Department Code		Department Code	
Contact Name		Contact Name	
ASSET NUMBER	DE	SCRIPTION	DATE OF TRANSFER
Please contact IT Pers	onnel for time and place of	procedure for the cannibalization	of computers.
The transferring depai	tment has securely remove	ed <u>ALL</u> sensitive data from all elec	tronic devices and media:
Signature of IT Pers	onnel		es □ No
TRANSFERRIN	IG OFFICE:	RECEIVII	NG OFFICE:
Signature of Accounta	ble Officer	Signature of Acco	untable Office
Typed Name and Title		Typed Name and T	- Fitle
Date		Date	
	and send original : Levy County	ned original to <u>Receiving Office.</u> v Clerks Office ot./Asset Mgr.	<u>– Receiving Office w</u> ill

NOTE: This <u>TRANSFER FORM</u> needs to accompany the equipment being transferred.

## Report of Transfer of Property or TRANS1

- 1. This form will be used in all cases of transfer to Accountable Officers <u>within</u> the County Realm.
- 2. The Transferring Office will fill out the Transferring Office Name, Dept. Code and Contact Name.
- 3. The Receiving Office will fill out the Dept. Name, Dept. Code and Contact Name.
- 4. The Transferring Office will fill out the Asset Number, Description and Date of Transfer
- 5. If the item is a computer, please contact the IT Personnel for time and place for procedure of cannibalization of computers.
- 6. The IT Personnel must then check and sign the next item on list if applicable.
- 7. The Transferring Office must sign, print name and title, and date it.
- 8. The <u>Transferring Office</u> will retain a SIGNED COPY, and then send SIGNED ORIGINAL to <u>Receiving Office</u>.
- 9. The <u>Receiving Office</u> will keep a SIGNED COPY and send ORIGINAL to: Levy County Clerks Office, Finance Dept./Asset Mgr.
- 10. As a reminder, this Transfer Form needs to accompany the equipment that is transferred.

## **LOAN**

LOANING

OFFICE

# LEVY COUNTY REPORT OF LOAN OF PROPERTY TO ANOTHER DEPT OR INTITY

To be used in all cases of loan between Accountable Officers OUTSIDE the County Realm

\* ANY LOANED PROPERTY VALUED \$5,000.00 AND UP MUST GO BEFORE THE BOARD FOR APPROVAL

RECEIVING

**DEPT. or INTITY** 

The following items of tangible personal property have been LOANED as indicated:

Department Name			Department Name	
Department Code				
Contact Name			Contact Name	
Phone Number			Phone Number	
ACCET NUMBER		DECODIDE	ANI.	DATE OF LOAN
ASSET NUMBER		DESCRIPTION	JIN .	DATE OF LOAN
				Date Returned / Initial
			WHEN RETURNING PRO	EPRTY PLEASE DATE AND INITIAL
Proposed Amount of T	ime on Loan			
NOTE: While on loan,	the receiving office v	vill be respons	sible for the item.	
LOANING OFFI	CE:		RECEIVING DI	EPT. or INTITY:
Signature of Accounta	ble Officer		Signature of A	uthorized Personnel
Typed Name and Title			Typed Name a	nd Title
Date			Date	

<u>LOANING OFFICE:</u> Have Receiving Dept. or Company sign and date. Each keep a copy and send COMPLETED ORIGINAL to Clerks Office Finance/Asset Mgr.

Revised 3/13

#### **LOAN FORM Instructions**

- 1. This form is for loan of county assets between Accountable Officers **OUTSIDE** county realm.
- 2. Note that loaned property valued \$5,000.00 and up must go before the board for approval.
- 3. Fill in Loaning officer and contact person, phone number.
- 4. Fill in Receiving Dept. or Entity name, contact person and phone number.
- 5. Since this form will be used again when asset is returned, please keep your copy on file. (Note the Date Returned/Initial box).
- 6. If you know an approximate time of loan, please note.
- 7. Accountable Loaning Officer must sign, print or type name and title and date.
- 8. Accountable Receiving Officer must sign, print or type name and title and date.
- 9. Both parties keep a "copy" and send the COMPLETED ORIGINAL to Clerks Office Finance/Asset Mgr.

While on loan, the receiving office will be responsible for the item.

Report loss or damage to Loaning office immediately.

August 2010

## **DONATE**

### LEVY COUNTY

## REPORT OF DONATION OF PROPERTY TO ACCOUNTABLE OFFICER

To be used in all cases of & donations between Accountable Officers OUTSIDE the County Realm

The following items of tangible personal property have been DONATED as indicated:

TRANSFERRING			RECEIVING		
OFFICE Deprt. Name			OFFICE Dept. or		
Бери. Маше			Company Name		
Dept. Code			Company		
			Address		
Contact Name			Contact Name		
ASSET NUMBE	R	DES	CRIPTION		DATE OF DONATION
Please contact I	T Perso	onnel for time and place of p	procedure for the can	nibalization	of computers.
The transferring de	partme	ent has securely removed <u>AL</u>	<u>L</u> sensitive data fron	n all electroi	nic devices and media:
Signature of IT P	ersonn	rel		] Yes	□ No
DONATII	NG OFI	FICE:		RECEIVIN	NG OFFICE:
Signature of Accountable Officer		Signati	Signature of Accountable Office		
Typed Name and	d Title		Typed	Name and T	Title
Date			Date		
		lave receiving Office or Con L to Clerks Office Finance/		Each keep a	a copy and send
		TS MUST GO BEFORE THE	-	)VAI – A I F	TTER OF RECEIPT FROM

DONATED FIXED ASSETS MUST GO BEFORE THE BOARD FOR APPROVAL – A LETTER OF RECEIPT FROM THE RECEIVING PARTY SHOULD BE TURNED IN WITH THIS FORM.

### Report of Donation of Property

- 1. This form will be used in all cases of DONATIONS to Accountable Officers outside the County Realm. (If in doubt, please contact Sandy ext 227 or Donna ext 231)
- 2. The Donating Office will fill out the Donating Office Name, Dept. Code and Contact Name.
- 3. The Receiving Office will fill out the Dept. Name and Contact Name.
- 4. The Donating Officer will fill out the Asset Number, Description and Date of Transfer or Donation.
- 5. If the item is a computer, please contact the **IT** Personnel for time and place for procedure of cannibalization of computers.
- 6. The IT Personnel must then check and sign in the area provided if applicable.
- 7. The Donating Office must sign, print name and title, and date.
- 8. The Donating Office will retain a SIGNED COPY, then send SIGNED ORIGINAL to Receiving Office
- 9. The <u>Receiving Office</u> will keep a SIGNED COPY and send ORIGINAL to : Levy County Clerks Office, Finance Dept./Asset Mgr.
- 10. A letter of receipt on letterhead must be obtained from the Accountable Receiving Agency.
- 11. As a reminder, this Donation Form needs to accompany the equipment that is transferred.

## **LEASE**

# LEVY COUNTY REPORT OF LEASE OF PROPERTY

To be used in all cases of lease between Accountable Officers OUTSIDE the County Realm

\* ANY LEASED PROPERTY VALUED \$5,000.00 AND UP MUST GO BEFORE THE BOARD FOR APPROVAL \*

The following items of tangible personal property have been LEASED as indicated:

COUNTY DEPT.			LEASING DEPT. or INTITY	
Department Name			Department Name	
Department Code				
Contact Name			Contact Name	
Phone Number			Phone Number	
LEASE AMOUNT OR		DESCRIPTIO	N	DATE OF LEASE
EQUIPTMENT VALUE		JEGORII 110	`	DATE OF ELAGE
				Date lease ends
		**	*This information can be	added at end of lease**
Proposed Amount of	Time on Lease			
		DAGT FO		DATA TION ON NAME
"THIS DOES NOT	SERVE AS A CONT	RACI, FUI	R TRACKING INFO	RMATION ONLY**
NOTE: While on leas	e, the receiving office wi	ill be respons	sible for the item.	
COUNTY DEPARTI	MENT:(receiving office)		LEASING I	DEPT. or INTITY:
Signature of Authoriz	and Davananal		Signature of A	countable Officer
Signature of Authoriz	ea Personnei		Signature of Ac	countable Officer
Typed Name and Title	)		Typed Name an	nd Title
			Date	
Dute			Dute	
	ave Leasing Dept. or Intit	ty sign and d	ate. Each keep a copy	and send COMPLETED
ORIGINAL to Clerks	Office Asset Mgr.			

Revised 9/12/12

LS1 Date	REPOF	LEVY COUNTY RT OF SURVEY – LO	ST/STOLEN				
		Dept. Contact					
		Dept					
The above	ve accountable officer re	equests relief from account	ability for the proper	ty described below:			
Asset #	Description	Date Acquired	Item Cost	Acct. Purposes Only Disposition			
<ul><li>□ LOST</li><li>Person(s) accountal</li></ul>	.,						
		limited access area, periodic	spot check, logged in	and out, etc.)			
Procedure that has	been implemented to cont	rol property loss (Explain):					
I hereby certify tha	It the above is a true and	l complete statement of rea	sons for the above I	request.			
Accountable Officer	Signature:			Date:			
Department Head: _							
	FOR SURVEY	BOARD ONLY – DO NOT W	/RITE IN THIS SPAC	E			
	• •	ther					
Survey Roard Appro	ival			Date			

 $Department\ retain\ SIGNED\ copy-Forward\ SIGNED\ ORIGINAL\ to\ Levy\ County\ Clerks\ Office,\ Finance\ Dept./Asset\ Mgr.$ 

## Report of Survey Loss/Stolen Form or LS1

This form is to report the loss or stolen status of Levy County Property

- 1. Date of form being filled out.
- 2. The Accountable Officer or Dept. Head
- 3. The Dept Contact
- 4. Dept Code. See attached.
- 5. Dept. name
- 6. Phone number
- 7. Asset #. Your office should have updated lists on Asset # and its description, date acquired and cost. We have attached new list of your current assets.
- 8. Stolen, a police report or case # should be noted.
- 9. Check if lost.
- 10. Person(s) accountable for property.
- 11. Action taken to locate property and please be thorough with description.
- 12. How was the item secured, stored or accounted for: Please explain
- 13. Procedure that has been implemented to control loss. (Explain)
- 14. Accountable Officer must sign date.
- 15. Dept. Head must sign.
- 16. Next section will go before survey board for consideration of information.
- 17. Department will retain a signed copy forward signed original to Levy County Clerks Office Finance Dept./Asset Mgr.