

THE UNIVERSITY OF IOWA
Statement of Federally-titled Equipment Status
 As of _____
 (Date)

ASSET INFORMATION

UI Tag # _____ Serial # _____ Model # _____

Grant/Prog # _____
 MFK (X XXXXX XX) MFK (X XXXXX XX) MFK (X XXXXX XX) MFK (X XXXXX XX)

Description _____

Custodian _____ Location _____

Gov't Tag # _____ Federal Agency Name Tag: _____
 Attached: Yes No Attached: Yes No

CURRENT STATUS

Currently in Use in Building _____ Room _____

FEDERAL ASSET CONDITION:

<input type="checkbox"/> Used – Good (UGD)	<input type="checkbox"/> Unused – Good (UUG)	<input type="checkbox"/> Repairs required – Good (RRG)
<input type="checkbox"/> Used – Fair (UFR)	<input type="checkbox"/> Unused – Fair (UUF)	<input type="checkbox"/> Repairs required – Fair (RRF)
<input type="checkbox"/> Used – Poor (UPR)	<input type="checkbox"/> Unused – Poor (UUP)	<input type="checkbox"/> Repairs required – Poor (RRP)
<input type="checkbox"/> Salvage (SLV)		<input type="checkbox"/> Scrap (SCR)

Request For Disposition

Departmental Disposition Requested: (Date) _____

Grant Accounting Disposition Requested: (Date) _____

Transfer Between Contract Accountability

Contract Transfer of Title: **From (G/Prog MFK Only)** _____
To (G/Prog MFK Only) _____

Off Campus Location _____

_____ Agency Site (Attach/file 1149 shipping document) _____ Home (Notification Memo)

CERTIFICATION / APPROVAL

Custodian _____
 (Name) _____ (Phone Number) _____

Department _____
 (Approval Signature) _____ (Date) _____

Grant Accounting Office _____
 (Approval Signature) _____ (Date) _____

Capital Assets Management Office _____
 (Approval Signature) _____ (Date) _____

PURPOSE

This form is to be completed by departments to document any of the following which may occur between annual federal audits:

- ❖ Change in asset condition
- ❖ Request for disposition
- ❖ Transfer of the asset between contract accountability

NOTE

NO FEDERALLY-TITLED EQUIPMENT MAY BE DISPOSED OF OR TRANSFERRED PRIOR TO AUTHORIZATION FROM GRANT ACCOUNTING.

PROCESS

Complete this form by providing all the identification assigned to the asset:

1. UI Tag number (if one has been assigned)
2. Grant/Program number (portion of the MFK used to record "ownership")
3. Serial Number
4. Asset description
5. Custodian (as assigned by your department)
6. Location (Building and Room#)
7. Government Tag Number
8. Blue Government Property Tag (indicate if attached to asset or not)
9. Section of form applicable to your needed action.

QUESTIONS

Questions regarding the proper use of condition codes and federal equipment forms should be directed to Grant Accounting Office 335-0080.
Questions regarding currently recorded status of equipment should be directed to the Property Management Office at 335-0118.

ROUTING OF COMPLETED FORM

Departments must submit this form to the Property Management Office. PMO 618 Jefferson Bldg.