Date _____ Page ____ of ____

NEW YORK STATE OFFICE OF GENERAL SERVICES
SURPLUS PERSONAL PROPERTY DISPOSITION
BLDG. 18, SUITE 102
THE GOV. W. AVERELL HARRIMAN
STATE OFFICE BUILDING CAMPUS
ALBANY, NY 12226

REPORT OF SURPLUS PERSONAL PROPERTY

Fixed Asset Number

NAME AND ADDRESS OF REPORTING AGENCY

THE PERSONAL PROPERTY LISTED BELOW IS NO LONGER REQUIRED BY THIS AGENCY AND THE AGENCY DECLARES, WITH RELATION TO ENVIRONMENTAL CONSERVATION LAW, ARTICLE 27 AND 6NYCRR PART 371, THAT SUCH LISTED PROPERTY IS NOT, AND DOES NOT CONTAIN, HAZARDOUS WASTE, PESTICIDES, OR RADIOACTIVE MATERIALS.

Authorized Signature: _____

LOCATION OF PROPERTY

Contact: _____

Phone No.: _____

ITEM #	DESCRIPTION	# OF UNITS	CONDITION	FOR OGS USE ONLY

_____ _____ _____

PRINTED NAME (First, MI, Last) **TITLE** **TELEPHONE NUMBER**

***INFORMATION SECURITY CERTIFICATION*:**

The undersigned acknowledges that the surplus IT equipment listed herein has been properly prepared for disposal and/or interagency transfer . All hard drives on PCs, printers, copiers, etc. have been carefully removed and destroyed, (removal should be accomplished in a manner that will allow a new hard drive to be installed in the device); all removable media (e.g., flash drives, tapes, diskettes) have been removed; and all cell phones, smart phones and PDAs have been reset to factory standards. If the data contained in a device cannot be permanently erased, that device must be destroyed. **IMPORTANT**: All state agency stickers, decals, etc. that identify the owner agency must be completely removed before OGS Surplus Property will accept the items.

SIGNATURE:_____ **DATE:** _____

NOTE: SHOULD THE DISPOSAL OF THIS EQUIPMENT REQUIRE ANY SPECIAL ACTION OR HANDLING, PLEASE EXPLAIN.	***Funds from which item(s) purchased**

*** ALL COSTS INCURRED BY OGS IN THE FINAL DISPOSITION OF THE IDENTIFIED "SPECIAL FUND" ITEMS, WILL BE DEDUCTED FROM THE GROSS SALE PROCEEDS, PRIOR TO REIMBURSEMENT TO YOUR AGENCY.**