



Office of General Services

State Surplus Property Registration Form for Web Application (CS-217)

Please email completed form to ogs.sm.state.surplus@ogs.ny.gov or fax to 518-457-4641.

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------|
| First Name | | Last Name | |
| Agency Name | | | |
| Agency Address | | City | State Zip Code |
| Phone | Fax | Email | |
| Access Level (check all that apply) <input type="checkbox"/> Online Transfer Request (Shopping Cart) <input type="checkbox"/> Online Declaration of Surplus Property <input type="checkbox"/> Online Surplus Property Status Reports | Name of Agency Surplus Coordinator | | Date |
| | Your coordinator will be notified by email of all declarations of surplus property and transfer requests. If approved, your coordinator will send the request to OGS Surplus Property. | | |

Please email completed form to ogs.sm.state.surplus@ogs.ny.gov or fax to 518-457-4641.
Your password will be emailed to you once your application is approved.

| |
|---------------------------|
| Requested User ID: |
|---------------------------|