#### CONNECTICUT MILITARY DEPARTMENT



## AUTHORIZATION TO TRANSFER STATE PROPERTY (ASSET MANAGEMENT)

**PURPOSE:** Use of this form is to obtain approval for the transfer and/or disposition of state personal property inventory items.

**AUTHORITY:** State of Connecticut Property Control Manual Chapter 5-10.

**INSTRUCTIONS:** Property that needs to be transferred with the agency will be recorded on this form and retained by the Fiscal Administrative Manager or designee.

The requesting individual is responsible for completing this form to the fullest extent possible.

REQUESTOR INFORMATION: Provide the current location of the item(s) to be transferred and the destination. Provide the appropriate account numbers for each location.

DESCRIPTION OF ITEMS: List the number of like items to be transferred, a description of the item, the serial number, state CORE-CT tag number and the purpose of the transfer.

#### **CERTIFICATION:**

Releaser: Current property account holder

Receiver: Individual who will be the new property account

holder

#### **SEND THIS FORM & SUPPORTING DOCUMENTATION TO:**

Connecticut Military Department State Property Officer 360 Broad Street Room #223 Hartford, Connecticut, 06105-3706 (860) 548-3247 (fax) CTMD Form 4-12 (Rev. 2/2017)

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CONTROL NUMBER:

REQUESTOR INFORMATION						
Requestor:			Date:			
From:			То:			
Location:			Location:			
Account #:			Account #:			
DESCRIE	PTION OF ITEMS					
Quantity			mber State Tag# Reason for Request			
Quantity	Equipment Description	Serial Nui	IIDEI	State Tag#	Reason for Request	
CERTIFIC	CATION:					
Releaser:						
		Signature			Date	
Receiver:						
Printed Name		Signature		 Date		