

City of New Bern  
Fixed Asset Transfer

Tag#: \_\_\_\_\_ Date: \_\_\_\_\_

Description:

Transferring Department

Location: \_\_\_\_\_ Department: \_\_\_\_\_

Transferring Custodian: \_\_\_\_\_

Dept. Head Authorization: \_\_\_\_\_ Date: \_\_\_\_\_

Receiving Department

Condition: Select...

New Location: \_\_\_\_\_ Department: \_\_\_\_\_

Receiving Custodian: \_\_\_\_\_

Dept. Head Authorization: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Information