CANYONS SCHOOL DISTRICT

Prepared By:_____ **Equipment Surplus** Pickup Room #:_____

School/Dept. Name: _____ Location #: _____

Quantity	Description	Manufacturer	Model	Serial Number	Asset Number	Picked Up	**Code	**Condition Code
								(A) Good Not Needed
								(B) Fair / Repairable
								(C) Broken / Unrepairable
								(D) Good / Obsolete
								(E) Parts Not Available
								(F) Not Complete Unit
								(G) Unknown
								(H) Other
								Notes:

☐ Surplus Warehouse ☐ Traded for New Equipment (Must have prior approval from Purchasing Department)

**Condition Code is required on each item being declared as surplus

Principal's Signature: _____ Date: _____

School Initial: _____ (Picked up from school)

X _____ _____

Driver Signature Date

*** Directions: 1: Principals should assure that this form has been completed properly and signed. (*Make a photo copy for school file*)

2: Fixed Assets will then have declared items picked up and removed from inventory.

Fixed Assets Only

Fixed Asset Received: Initial_____ Date:_____ Completed: Initial_____ Date:_____

REV 11-2026