



The University of Georgia

Property Control Request for Transfer of Equipment

UGA Inventory Number	Equipment Description and Serial Number	Property Control will furnish the following:	
		Funding Account	Funding Amount
1.			
2.			
3.			
4.			

Reason for request: _____

Name & address of Institution _____
receiving equipment: _____

Shipping charges to be paid by: _____

The receiving institution agrees to the following: Transfer terms will be determined from and governed by the language of the funding instrument and regulations cited therein and applicable state laws and regulations and University policies.

REQUIRED SIGNATURES

Principal Investigator	_____	_____
	Printed Name	Title
Department Head	_____	_____
	Signature	Date
Property Control	_____	_____
	Printed Name	Title
Contracts & Grants	_____	_____
	Signature	Date
Receiving Institution	_____	_____
	Printed Name	Title
	_____	_____
	Signature	Date

Return one signed copy to:

University of Georgia
Contracts and Grants
475 N. Lumpkin Street
Athens, GA 30602-5333