

Interdepartmental Asset Transfer Form

Date of Transfer

Transferring Department

Department Name

Contact Person

Receiving Department

Department Name

Contact Person

Asset Details

Asset Description	Asset Tag/ID	Quantity	Condition	Additional Notes
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

Reason for Transfer

Authorized By (Transferring Dept.)

Name & Signature

Authorized By (Receiving Dept.)

Name & Signature

Date

Important Notes

- Ensure all asset details are accurate prior to submitting the form.
- Both departments must authorize the transfer with proper signatures.
- Retain a copy of the form for asset tracking and future reference.
- Check organizational policies for additional approval or documentation requirements.