

Asset Register Form for Physical Verification

Section 1: Basic Information

Department:

Building/Location:

Date of Verification:

Verified By:

Designation:

Contact No.:

Section 2: Asset Details

S/N	Asset Description	Asset Code/Tag No.	Make/Model	Serial No.	Date of Purchase	Present Condition	Remarks

Verified By
(Signature & Date)

Head of Department/Section
(Signature & Date)

Remarks by Audit (if any)

- Please fill the form in legible handwriting or use a typed format where possible.
- All assets must be physically verified against their asset codes and details.
- Any discrepancies or missing assets should be clearly mentioned in the Remarks column.
- The verification must be signed and dated by the verifier and Head of Department.
- Retain a copy of this form for departmental records and submit to the audit/finance office.