



YOUR ORGANIZATION NAME

Asset Transfer Form

Document Code: ATF-2024-01

1. Asset Details

Asset Name		Asset Type	
Asset Code / Serial No.		Model / Description	
Current Location		Condition	

2. Transfer Details

From (Department/Person)	
To (Department/Person)	
Date of Transfer	
Reason for Transfer	

3. Approvals & Acknowledgement

Authorized By
(Name & Signature)

Handed Over By
(Name & Signature)

Received By
(Name & Signature)

4. Additional Remarks

Important Notes:

- This form must accompany any physical transfer of assets between departments or individuals.
- All sections must be completed and signed by authorized personnel.
- Maintain a copy of this document in both the transferring and receiving department's records.
- Incorrect or incomplete forms may delay processing and asset accountability.
- Refer to the organization's asset management policy for further details.