

Fixed Asset Internal Movement Record

Document No.: _____ | Date: _____

Origin Location: _____

Destination Location: _____

Requested by (Dept/Person): _____

Approved by: _____

Asset(s) Details

No.	Asset ID / Tag	Description	Serial Number	Current Condition	Remarks
1					
2					
3					

Reason for Movement: _____

Prepared By
(Origin Dept.)

Approved By

Received By
(Destination Dept.)

Important Notes

- This form must be completed and approved before moving any fixed asset between internal locations.
- Ensure all asset information and reasons for transfer are accurately recorded.
- Both originating and receiving departments must acknowledge receipt and condition of assets.
- Maintain this document for audit and asset tracking purposes.
- Any discrepancies should be reported to the asset management team immediately.