

Office Asset Handover Form

Employee & Department Details

Employee Name: Employee ID:
Designation: Department:
Date of Handover: / / Location:

Asset Details

#	Asset Description	Asset ID/ Serial No	Quantity	Condition	Remarks
1	Good / Fair / Poor
2	Good / Fair / Poor
3	Good / Fair / Poor

Acknowledgement

I hereby acknowledge receipt and responsibility for the assets listed above, and confirm that all items are in stated condition.

Employee Signature

Date: / /
Handover By (Admin/IT/HR)

Date: / /

Important Notes

- This form should be completed and signed during the asset handover or return process.
- Ensure all assets are thoroughly checked for condition and listed correctly with serial numbers or IDs.
- This document serves as official record for office-issued assets and is necessary for audit and clearance purposes.
- Both employee and authorized department representative must sign this form for validity.
- All supporting documents or additional remarks should be attached if necessary.