

# Asset Surrender & Verification Form

Employee Name

Full name

Employee ID

ID number

Department

Department

Designation

Designation

Date of Resignation

Last Working Day

## Company Asset Surrender List

#	Asset Description	Asset Tag/Serial No.	Date of Surrender	Condition	Remarks	Verifier Initials
1	e.g. Laptop			Good/Damaged		
2	e.g. Phone					
3	e.g. Access Ca					
4						

## Additional Comments / Outstanding Issues

Enter comments or outstanding asset issues

Employee Signature

Name

Date

Verifier (Admin/IT/HR)

Name

Date

## Important Notes

- All assigned company assets must be surrendered before clearance is granted.
- Outstanding or missing assets may result in recovery from final settlement.
- This form must be verified and signed by Authorized Personnel.
- Ensure accurate details and condition of assets are recorded.
- Keep a copy of this document for future reference.