

# PROPERTY DELETION REQUEST



UNIVERSITY of  
NEW ORLEANS

Please complete this form to **request** a deletion and forward to:  
**Property Control, 113 Campus Police Building or fax to 504-280-5469**

Department: \_\_\_\_\_ Date \_\_\_\_\_

Equipment Custodian: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

## DATA ON EQUIPMENT: \_\_\_\_\_

UNO Inventory #	Serial #	Description	Location (Bldg./Room)

## REASON FOR DELETION REQUEST: \_\_\_\_\_

Equipment stolen                              Police Report number: \_\_\_\_\_

Equipment destroyed      Reason: \_\_\_\_\_

Equipment to be dismantled for parts

Equipment to be traded in toward new purchase

**THIS IS ONLY A REQUEST.** Property Control will contact you to inform you of the needed documentation to forward the deletion request to LPAA.

\_\_\_\_\_  
Department Chair/Director

\_\_\_\_\_  
Date