Baker County Asset Acquisition/Deletion/Transfer Form (AADT)

TODAY’S DATE: ____________________________
SUBMITTED BY: ____________________________
DEPARTMENT: ______________________________

ACTIVITY METHOD CODES

Please Check One

☐ P = Purchased
☐ T = Traded
☐ O = Obsolescence
☐ R = Returned to Vendor
☐ S = Sold
☐ L = Lost
☐ V = Vandalized
☐ W = Worn Out or Destroyed
☐ M = Miscellaneous; please provide notation.

ACTIVITY DATE: ____________________________
PURCHASED FROM (VENDOR): ____________________________
TRANSACTION AMOUNT: ____________________________

CAPITAL ASSET DESCRIPTION: (FILL IN ANY INFORMATION THAT APPLIES)

OFFICE EQUIPMENT & FURNITURE INFORMATION

ITEM: ________________________________________
SERIAL NUMBER: _________________________________
COUNTY ASSET TAG#: _____________________________

VEHICLE INFORMATION

VEHICLE ID NUMBER (VIN): ____________________________ LICENSE: ____________________________
YEAR: ____________________________ VEHICLE MAKE: ____________________________ BODY STYLE: ____________________________

BUILDING INFORMATION

STREET ADDRESS: _________________________________
CITY: _________________________________________

PROPERTY INFORMATION

ASSESSOR REFERENCE NUMBER: ____________________________ MAP#: ____________________________
SITE ADDRESS: _________________________________
CITY: _________________________________________

OTHER INFORMATION

TRANSFER OF ASSETS BETWEEN COUNTY DEPARTMENTS:

TRANSFERRED FROM DEPARTMENT: ____________________________
TRANSFERRED TO DEPARTMENT: ____________________________
DATE OF TRANSFER: ____________________________

PLEASE ATTACH ANY DOCUMENTS THAT WOULD APPLY TO THIS CAPITAL ASSET AND RETURN TO ADMINISTRATIVE SERVICES.