

**PROPERTY DISPOSAL REQUEST – NON-ELECTRONIC ITEMS**

**SURPLUS PROPERTY**

2045 Westland Road, Cheyenne, WY 82002

Office: 307-777-7901

Fax: 307-634-5710

Agency Name: \_\_\_\_\_ PP-4 Number: \_\_\_\_\_

Agency Rep Name: \_\_\_\_\_

Agency Rep Phone #: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Pick up at agency site? Yes  No

Deliver to Surplus Property Warehouse? Yes  No

Line Item	State Asset Tag #	Division Name	Description	Working Condition?	Rec'd
1				Yes <input type="checkbox"/> No <input type="checkbox"/>	
2				Yes <input type="checkbox"/> No <input type="checkbox"/>	
3				Yes <input type="checkbox"/> No <input type="checkbox"/>	
4				Yes <input type="checkbox"/> No <input type="checkbox"/>	
5				Yes <input type="checkbox"/> No <input type="checkbox"/>	
6				Yes <input type="checkbox"/> No <input type="checkbox"/>	
7				Yes <input type="checkbox"/> No <input type="checkbox"/>	
8				Yes <input type="checkbox"/> No <input type="checkbox"/>	
9				Yes <input type="checkbox"/> No <input type="checkbox"/>	
10				Yes <input type="checkbox"/> No <input type="checkbox"/>	
11				Yes <input type="checkbox"/> No <input type="checkbox"/>	
12				Yes <input type="checkbox"/> No <input type="checkbox"/>	
13				Yes <input type="checkbox"/> No <input type="checkbox"/>	
14				Yes <input type="checkbox"/> No <input type="checkbox"/>	
15				Yes <input type="checkbox"/> No <input type="checkbox"/>	

*Use additional page, if needed, by downloading PP-4 Page 2.*

**Please sign form and fax to Surplus Property in order to schedule pick-up**

Agency Rep Signature: \_\_\_\_\_

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

Surplus Property Rep Signature: \_\_\_\_\_

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

**Surplus Property Use Only:**

Scheduled Pick-up or Drop-off Date: \_\_\_\_\_

Time: \_\_\_\_\_