

ATTACHMENT B

Michigan Department
of Transportation
3651 (10/11)

EQUIPMENT DISPOSAL/TRANSFER REQUEST FORM

I. ACTION INFORMATION

Transfer to Agency

Local Sale

Other

II. AGENCY INFORMATION

EQUIPMENT FROM (Agency)			
ADDRESS	CITY	STATE	ZIP CODE

III. EQUIPMENT INFORMATION

ITEM	MAKE & MODEL
SERIAL NUMBER	GENERAL CONDITION
LOCATION	DATE REMOVED FROM SERVICE

IV. EQUIPMENT TRANSFER

TRANSFER TO (Agency)			
ADDRESS	CITY	STATE	ZIP CODE

RECEIVED BY PROJECT MANAGER	DATE
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