



Report of Loss, Damage, Destruction & Theft of Assets

Department or Division Name _____	
Person who informed Property _____	
Person responsible for asset _____	Banner ID _____
How incident was reported _____	
Description of Asset _____	
PCN _____	Serial Number _____
Model Number _____	Manufacturer _____
Yr. of Manufacture _____	Yr. NMT Received _____
Original Acq. Cost \$ _____	Fund/Index _____

Describe the current or future need for this asset. _____

- Type of Incident: Cannibalized Destroyed/Wrecked Improperly Disposed of
 Lost Obsolete (SOFTWARE ONLY) Returned to Sponsor
 Stolen Traded-In Unidentifiable Warranty Replacement
 Other _____

If the asset was stolen, a police report **MUST** be filed and a copy **MUST** be attached to this form.

Description of Incident _____

Date of Incident _____ Location of incident _____

Supervisor or Department Head Notified Yes No If no, do so before continuing.

Party responsible for loss, damage or destruction _____

Was sensitive data (i.e. names, addresses, social security numbers, etc.) compromised? If so, were appropriate agencies notified? _____

What action was taken, by the Department /Division to ensure future loss is kept to a minimum?

Reported By _____ Date _____

Authorized Supervisor _____ Date _____