



Equipment Disposition Request Form

Homeland Security Grant Program (SHSP,UASI) CFDA97.067
Non-Profit Security Grant Program CFDA 97.008
Emergency Management Performance Grant CFDA 97.042

Subrecipient Name:

Grant Number:

Program Manager Name, Number, Email:

Date Requested:

This form is required to be completed, signed, and submitted to GEMA/HS for disposal requests along with your entity's Inventory Disposal Policy. All requests must be signed below by the Authorized Representative.

Please provide an explanation for the disposition, include the time frame for the disposal, include the fair market value of the equipment, and mileage as necessary.

[Empty box for explanation of disposition]

Please provide a description and serial number of item being disposed of, transferred, or surplused.

Table with 2 columns: Item Description, Serial Number. Contains 5 empty rows.

Inventory Disposal Policy included: Yes No

Authorized Grantee Official Signature Title Date

GEMA/HS Approval Signature Date