## Final Disposal of Equipment Capital Asset Information Sheet

Agency Name:	Date:
Agency Address:	Telephone Number:
Was Useful Life met for the Equipment: ○ Yes ○ No	Disposal Date:
Type of Disposal: O Auctioned/Sold O Transferred	
Reason for Disposal: O Met Useful Life O Damaged/Inc	perable Other:
Serial/Agency Number: N	Nanufacturer:
Type of Equipment:	FTA/State Funding Program:
TEAM/TRANS Number: Equity Received:	Beginning Service Date:
Agency Signature:	Date:
Support Documents: (1) Copy of Receipt or Bill of Sale (2	) Copy of Check or Proof of Transfer of funds
(3) Copy of Bank Deposit Slip if Equity Received for Equipr	ment (4) If the equity received is over \$5,000,
please contact TDOT Multimodal for additional instructions	. And, a letter from the agency is required stating how
their share of the proceeds are going to be re-allocated. (5)	If the equipment is transferred to another agency, a
letter of acknowledgment from each agency is required to v	verify the transfer of the equipment.
Notes:	
1. Proof of Public Sale/Action may be requested from	n the Agency by the Multimodal Office.
2. Proceeds from the sale of any equipment with Fede	eral or state interest must be used in the local transit
program or returned to TDOT.	
Documentation should be mailed to: Multimodal Trans	portation Resources Division
ATTN: Asset Manager, James K. Polk Bldg. 505 Deader	rick St. Suite 1800, Nashville, TN 37243.
Note: DOT 49 CFR 19.34(f)(6) states that when a rec proper sales procedures shall be established that pro	

Completed by TDOT Multimodal Division Staff

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approval by: \_\_\_\_\_ Date: \_\_\_\_\_

and result in the highest possible return.

Revised: Aug 2023