



Sponsored Equipment Loss Form

This form should be submitted for any loss of equipment that is reportable under a sponsored award.

Attach appropriate documentation as warranted. Police report and affidavit are required for stolen property.

This form prepared by:

Name: Phone: Date: Dept Code: Dept: Dept Head:

Prime Sponsor: Award: Grant No: Principal Investigator: Fund: Project End Date: Subcontractor Award: Sub P.I.: Subaward End Date:

Details of Incident

Type of Incident:

- Lost Stolen Improperly Disposed Destroyed Cannibalized Other (Explain):

Equipment Details:

Inv. No: Description: Model No: Serial No: Nat'l Stock No: UID: Qty: Cost/Value:

Documents Attached:

- Police Report Affidavit Other

Type of Equipment:

- Contractor Acquired GFE

Incident Narrative:

Corrective Action Taken:

Did the Equipment Contain: Sensitive Information Hazardous Material

TYPED NAME

SIGNATURE

DATE

Subcontractor P.I.:

Prime Contractor P.I.:

Property Officer/Asst. Property Officer:

General Instructions

This form prepared by	Name, phone number of person completing form - for contact purposes.
Phone	Phone number of person completing the form.
Date	Date of form completion.
Dept Code	Code assigned to department.
Dept	Name of department associated with equipment.
Dept Head	Unit head of department.
Award	Award title in FRAGRNT screen of BANNER.
Grant No	Grant number beginning with "G" on FRAGRNT screen in BANNER.
Principal Investigator	Name of person responsible for research.
Fund	Fund established by Sponsored Programs Accounting for award.
Project End Date	Found in FRAGRNT screen of BANNER.
Subcontractor Award Sub P.I. Subaward End Date	Complete these three fields if loss is being reported by a subcontractor of the award. Otherwise leave blank.
Type of Incident	Select the appropriate box that applies.
Equipment Details	Complete information for lost item.
Documents Attached	Select the boxes that apply.
Type of Equipment	Choose <i>Contractor Acquired</i> for equipment purchased with award funds Choose <i>GFE</i> for equipment provided by sponsor
Incident Narrative	Brief explanation of reason for equipment loss.
Corrective Action Taken	Explanation of steps taken to prevent another loss of equipment.
Sensitive Info/Hazardous Material	Indicate if either or both of these conditions apply
Signatures of Sub P.I./P.I.	Leave subcontractor P.I. info blank if not applicable.
Complete and forward to:	Receiving & Property Control (RPC) P.O. Box 6177 Mississippi State, MS 39762 Mail Stop 9605 Phone: (662) 325-2545 Fax: (662) 325-4551

Maintain a copy of this form in departmental file for audit purposes.