



**City of Fitchburg, Massachusetts**  
Procurement Department

**DISPOSAL OF SURPLUS SUPPLIES AND EQUIPMENT**

To: Mary Delaney, Chief Procurement Officer

**Please submit one form per item or lot of same items**

Item(s) Description: \_\_\_\_\_

Quantity: \_\_\_\_\_

Condition of Item(s): \_\_\_\_\_

Reason for Surplus: \_\_\_\_\_

Location of Item(s): \_\_\_\_\_

Good Faith Estimate of Value: \_\_\_\_\_

Is this Technology Related? \_\_\_\_\_

When does the item or lot need to be removed? \_\_\_\_\_

*I hereby control and therefore declare the following item as surplus and request disposition:*

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Date

*Approved by:*

\_\_\_\_\_  
Mayor Samantha Squailia

\_\_\_\_\_  
Date

Received and recorded by:

\_\_\_\_\_  
Purchasing Department

\_\_\_\_\_  
Date

\*If approved by the Mayor, the form will be submitted to the Purchasing Department, recorded with the City Property Committee, and copied to the City Auditor for inventory and insurance purposes.

**Purchasing Department Use Only**

\_\_\_\_ Item transferred to other department

\_\_\_\_ Item disposed of (discarded)

\_\_\_\_ Item auctioned or placed for bid

\_\_\_\_ Payment received \$

\_\_\_\_ Recorded with Property Committee

\_\_\_\_ Copied to City Auditor