

# Moveable Capital Equipment Management Form

STATUS	BU TAG #	DESCRIPTION	MANUFACTURER	MODEL	SERIAL NUMBER	BUILDING	ROOM	NOTES
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## DELETION STATUS CODES

**DS:** Destroyed      **SO:** Sold  
**DN:** Donated Out      **ST:** Stolen  
**RV:** Returned to Vendor      **TI:** Traded In  
**SC:** Scrapped/Disposed      **TR:** Transferred Out

## ACQUISITION CODES

**D:** Donation Recieved      **T:** Transferred In  
**L:** Leased or Loaned

## CHANGE OF STATUS CODES

**F:** Fabricated      **N:** Not in Use  
**M:** Missing      **R:** Relocated

Cost Center Number

Equipment Custodian (printed name)

Equipment Custodian email

Equipment Custodian Signature

Cost Center Name

Date

Dean/Department Chair/Unit Head (print name)

Dean/Department Chair/Unit Head Signature

RETURN SIGNED FORM TO [property@bu.edu](mailto:property@bu.edu)