



Asset/Inventory Tag Number: _____

Property Control Registration Form - Hazardous Material

Purpose of form Addition Drop Change Transfer

Description _____

Parent Asset or PO # _____

Total Cost _____

Responsible Org./Dept. _____

Location _____

	<i>Building Name</i>	<i>Building #</i>	<i>Room #</i>			
Title To	<input type="checkbox"/> FF <small>Fed. Gov. Furn./Loan</small>	<input type="checkbox"/> FG <small>Fed. Gov. Bought by Rice</small>	<input type="checkbox"/> IN <small>Institution</small>	<input type="checkbox"/> RN <small>Rice (Subj to Govt. rights nfdp)</small>	<input type="checkbox"/> RG <small>Rice (Subj to Govt. rights fdp)</small>	<input type="checkbox"/> PS <small>Private Other Sponsor</small>

Purchase Order # _____

Vendor _____

Manufacturer _____

Year Built/Make _____ Model # _____

Serial # _____

Date Rec'd/Paid _____ In service Date _____

	<i>Fund</i>	<i>Org</i>	<i>Acct</i>
Funding Source(s)			

Special Considerations _____

Completed by _____

Return Tag(s) To _____

Date Tagged _____

Date Form Returned _____