**EQUIPMENT INVENTORY**

# Items of Equipment with a Current Fair Market Value of

$5,000 or More and Purchased with HAVA Funds

Official Signature: Printed Name:

Title:

Grant Number: Date of submission:

Is this program continuing beyond the

Telephone Number:

expiration date of this grant?

Yes No

If the above answer is YES, does the grantee request to continue use of all or part of the equipment? Yes No

or

Does the grantee request the use of the equipment on other federally supported activities? Yes No

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Item Description | Equipment Serial  No. | Location/Site and  Condition\* | Acquisition  Date/Cost | Estimated Current  Fair Market Value | Disposition/Date |
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## E-Excellent VG-Very Good G-Good F-Fair P-Poor

If the grantee does not request continued use of items of equipment, the EAC will issue disposition instructions upon receipt of the inventory.