

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
DEPARTMENT OF FINANCE
DIVISION OF PROCUREMENT SERVICES
PROPERTY MANAGEMENT BRANCH

PS-100

SNS-22-07-04

REQUEST FOR SURVEY

DEPARTMENT / DIVISION / ACTIVITY:

LOCATION OF PROPERTY :

Survey Officer, Procurement Services

You are requested to survey the following listed property and to relieve me of accountability therefor by approval of this report. (xxx)

ACCOUNTABLE PERSON (PRINT & SIGN)

ITEM NO.	QTY	PROPERTY TAG NO.	DESCRIPTION OF PROPERTY	ACQUISITION COST	CONDITION CODE	DISPOSITION CODE
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						

NOTE: IF MOTOR VEHICLE, PLEASE ATTACHED VEHICLE REGISTRATION TO THIS REQUEST.

(x) CONDITION CODE:

N - NEW	1 - Excellent
E - USED (recondition)	2 - Good
O - USED (usable w/out repair)	3 - Fair
R - USED (repair required)	4 - Poor
X - Items of no further value for use as intended but possible value other than scrap.	
Y - WORN OUT (No value except as scrap)	

(xx) DISPOSITION CODE:

1 - Unneeded (dispose of in accordance with applicable regulations)
2 - Destruction
3 - Abandonment
4 - Donation to public bodies
5 - Sale
6 - Repair (indicate needs)
7 - Salvage usable parts and sale remainder
8 - Reduce to scrap
9 - Other(described under recommendation)

(XXX) Requesting activity must complete all applicable items on this form.

PS-100 Form (Revised 09/15/2022)

Request for Survey

Check applicable block:

☐

This is To Certify That the property listed hereon has been inspected by the undersigned and its condition and present estimated value are as shown. The findings listed below substantiate the recommended disposition set out on the face of this form.

☐

This is To Certify that the circumstances surrounding the loss, or damage of the property listed hereon have been investigated by the undersigned and the findings and recommendations are listed below.

Findings:

Recommendation:

The Property will be put on Public Sale, Negotiate Sale "As Is", "Where Is" or will be placed as Scrap since it is no further value for the CNMI Government.

SURVEY OFFICER RECOMMENDATION

(Date)

(Signature)

Title

REVIEWING AUTHORITY ACTION

☐

APPROVED

☐

DISAPPROVED

(Date)

Geraldine T. Cruz

Signature of Reviewing Authority

Director
Procurement Services

Title

CERTIFICATE OF DISPOSITION

I Certify That the property listed hereon has been disposed of the following manner

(Date)

(Signature)

Title

FOR APPROVED DESTRUCTION ONLY

I Certify That I have witnessed the destruction (reduction to scrap) of the listed items.

(Date)

(Signature of Witnessing Officer)

Title

ITEM NO.	QTY	PROPERTY TAG NO.	DESCRIPTION	ACQUISITION COST	CONDITION CODE	DISPOSITION CODE
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ITEM NO.	QTY	PROPERTY TAG NO.	DESCRIPTION	ACQUISITION COST	CONDITION CODE	DISPOSITION CODE
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(xxx) Requesting Activity Must
Complete All Applicable Items
on this Form.