



**RESEARCH MANAGEMENT CENTRE
(RMC)**

UTM/RMC/F/0177

APPLICATION FORM FOR WRITE-OFF ASSET
Borang Permohonan Pelupusan Harta Penyelidikan

Tel: ☎ 07 – 55 37930 Fax: ☎ 07-55 37811

TYPE OF APPLICATION <i>Jenis Permohonan</i>	<input type="checkbox"/>	LUPUS MUSNAH	<input type="checkbox"/>	LUPUS BELI	<input type="checkbox"/>	LUPUS HADIAH	<input type="checkbox"/>	LUPUS PINDAH
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1. PROJECT LEADER'S PARTICULARS

Maklumat Ketua Projek

Name <i>(with designation)</i> <i>Nama</i> <i>(dengan gelaran)</i>			
NRIC / Passport No. <i>No. I/C / Passport</i>		Staff No. <i>No. Pekerja</i>	
Office Telephone No. <i>No. Telefon Pejabat</i>		Office Fax No. <i>No. Faks Pejabat</i>	
Hand phone No. <i>No. Telefon Bimbit</i>		E-mail Address <i>Alamat Email</i>	
Faculty / Fakulti		Nationality <i>Warganegara</i>	

2. NEW OWNERSHIP

Pemilik Baru (LUPUS PINDAH SAHAJA)

Name of Organisation <i>Nama Organisasi</i>			
Address <i>Alamat</i>		Person in charge <i>Individu Bertanggungjawab</i>	
		Contact No. : <i>No. Tel :</i>	

3. LIST OF ASSETS (Please use attachment 1 if necessary)

Senarai Aset Alih (Sila gunakan lampiran 1 jika perlu)

BIL	NAME OF ASSETS <i>(Nama Aset)</i>	SERIAL NO. FORM KEW PA-2 / KEW PA-3 <i>(No. Siri Borang KEW PA-2 / KEW PA-3)</i>

5. VERIFICATION OF PROJECT LEADER

Pengesahan Ketua Projek

Stamp & Signature : <i>Cop & Tandatangan :</i>		Date :
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6. ENDORSEMENT BY RMC

Sokongan RMC

Stamp & Signature : <i>Cop & Tandatangan :</i>		Remark: <i>Catatan</i>
Date : <i>Tarikh:</i>		

