

28
4/3/19

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM

DEPARTMENT SUBMITTED BY: PW OPS

DATE: April 2 2019



Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) <\$5,000.00

Page 1 of 1

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2009	Bush hog C101.00642805	2/6/2009 \$ 6,012.00	71403	Poor				X			X				

Per the code of the City of North Port, Florida:
Assets with an original purchase value greater than the threshold limit set forth, must receive
City Commission approval for disposal and then may be disposed of (BY FINANCE) in an appropriate fashion

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

[Signature] 4/3/19
DEPARTMENT DIRECTOR DATE
[Signature] 4-2-19
FIXED ASSET CUSTODIAN DATE

Fleet Approved

Approval Initial: [Signature]
Date: 4/3/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

[Signature] 4/16/19
FINANCE DIRECTOR Date
CITY MANAGER DATE

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM

2/27/19

DEPARTMENT SUBMITTED BY: PW R&D
DATE: February 1, 2019



Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2008	Hydroseeder 1F9GS18258F135328	12/17/2008 \$36,145.00	71388	Poor				X			X				

Per the code of the City of North Port, Florida:
Assets with an original purchase value greater than the threshold limit set forth, must receive
City Commission approval for disposal and then may be disposed of (BY FINANCE) in an appropriate fashion

Fleet Approved

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

James B. Brown 3/27/19
DEPARTMENT DIRECTOR DATE
[Signature] 3-27-19
FIXED ASSET CUSTODIAN DATE

Approval Initial: *Kwi*
Date: 3/27/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

Kenneth J. Ferrer 4/1/19
FINANCE DIRECTOR DATE
CITY MANAGER DATE

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM



DEPARTMENT SUBMITTED BY: Utilities

DATE: May 16, 2019

Overthreshold Item(s) \$5,000.00+

Underthreshold Item(s) < \$5,000.00

Page 1 of 1

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2006	Ford F-350	12/28/2006	71006	Poor				X			X				
	1FDWF36P06ED92595	\$29,612.72													

Per the code of the City of North Port, Florida:
Assets with an original purchase value greater than the threshold limit set forth, must receive
City Commission approval for disposal and the approval of the CITY MANAGER (FINANCE) in an appropriate fashion.

Heer Approved

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this disposal(s). I accept full responsibility for this action.

DEPARTMENT DIRECTOR

5-21-19

DATE

FIXED ASSET CUSTODIAN

5-21-19

DATE

Approval Initial: KE

Date: 5/21/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

FINANCE DIRECTOR

5/23/19

DATE

CITY MANAGER

DATE

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM



DEPARTMENT SUBMITTED BY: Utilities

DATE: May 21 2019

Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

Page 1 of 1

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
1998	Thompson Pump 4V-269	12/15/1999 \$ 15,175.00	06543	Poor				X			X				

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Assets with an original purchase value greater than the threshold limit set forth, must receive
City Commission approval for disposal and then may be disposed of (BY FINANCE) in an appropriate fashion

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

DEPARTMENT DIRECTOR [Signature] DATE 5-21-19
FIXED ASSET CUSTODIAN [Signature] DATE 5-21-19

Fleet Approved

Approval Initial: [Signature]
Date: 5/21/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

FINANCE DIRECTOR [Signature] DATE 5/23/19
CITY MANAGER _____ DATE _____

28
5/14/19

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM



DEPARTMENT SUBMITTED BY: PW Eng
DATE: April 22, 2019

Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

Page 1 of 1

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2006	Ford F-150 1FTRF14566NA18466	9/9/2005 \$ 18,498.00	70618	Poor				X			X				

Per the code of the City of North Port, Florida:
Assets with an original purchase price greater than the threshold limit set forth, must receive City Commission approval for disposal and when received, disposed of (BY THE CODE) in an appropriate fashion

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

John B. Bell 4/30/19
DEPARTMENT DIRECTOR DATE
[Signature] 4.30.19
FIXED ASSET CUSTODIAN DATE

Approval Initial: [Signature]
Date: 4/30/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

[Signature] 5/23/19
FINANCE DIRECTOR DATE
CITY MANAGER DATE

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM



DEPARTMENT SUBMITTED BY: PW RD
DATE: April 19 2019

Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2007	Gradall Excavator	5/30/2007	71236 & 71236-1-3	Poor				X			X				
	3140000212	\$ 254,638.00													
2003	Cat Excavator	7/7/2003	70356	Poor				X			X				
	3140000212	\$ 148,673.00													

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Fleet Approved

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

[Signature] 4/19/19
DEPARTMENT DIRECTOR DATE
[Signature] 4-19-19
FIXED ASSET CUSTODIAN DATE

Approval Initial: [Signature]
Date: 4/19/2019

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

[Signature]
FINANCE DIRECTOR Date
CITY MANAGER DATE

5/29/19

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM



DEPARTMENT SUBMITTED BY: Fire/EMS

DATE: April 22, 2019

Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

Page 1 of 1

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2009	Chev Ambulance	12/17/2009	71530	Poor				X			X				
	1GBE4V1939F403411	\$ 150,761.00													
2009	Chev Ambulance	12/17/2009	71531	Poor				X				X			
	1GBE4V1959F403121	\$ 150,761.00													

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Fleet Approved

By signing this form, I attest that due diligence has been performed and proper procedures have been followed as outlined in the Code of the City of North Port Florida prior to this/these disposal(s). I accept full responsibility for this action.

DEPARTMENT DIRECTOR [Signature] DATE 4.22.19
 FIXED ASSET CUSTODIAN [Signature] DATE _____

Approval Initial: [Signature]
 Date: 4/22/19

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

FINANCE DIRECTOR [Signature] DATE 5/24/19
 CITY MANAGER _____ DATE _____

CITY OF NORTH PORT
PROPERTY DISPOSAL FORM

20
6/14/19

DEPARTMENT SUBMITTED BY: PW - OPS

DATE: February 13, 2019



Overthreshold Item(s) \$5,000.00+
 Underthreshold Item(s) < \$5,000.00

ITEM DESCRIPTION					REASON FOR DISPOSAL SELECT ONE OPTION (X)						SELECT ONE METHOD OF DISPOSAL (X)				
ITEM YEAR	ITEM DESCRIPTION (Make, Model, Serial, VIN# & Mileage)	DATE OF PURCHASE/ COST	CITY PERIPHERAL ID NUMBER	CURRENT ITEM CONDITION	OBSOLETE	LOST/ STOLEN	SCRAP	SURPLUS AUCTION / DONATION	TRADED IN	PER REPLACEMENT POLICY	AUCTION	DONATION	SCRAP	STOLEN/LOST	TRADED IN
2000	Freightliner Bucket 1FV6JBB9YHB27362	2/20/2009 \$ 46,800.00	71406	Poor				X			X				

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Fleet Approved

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[Signature] 5/13/19
DEPARTMENT DIRECTOR DATE
[Signature] 5-13-19
FIXED ASSET CUSTODIAN DATE

Approval Initial: [Signature]
Date: 5/13/2019

By signing this form, I attest that the required information necessary for the proper disposal of said asset(s) has been received.

[Signature] 6/6/19
FINANCE DIRECTOR DATE
CITY MANAGER DATE