

Essex Equipment CHECKLIST

Date of Termination: _____

Employee: _____ ID# _____

Office Location/Property: _____ Collected By: _____

Computer/Software

- Computer (Asset Tag # _____)
- Lap-top (Asset Tag # _____)
- Cell Phone (Asset Tag # _____)
- iPad (Asset Tag # _____)
- Misc. IT Equipment or Hardware: _____

2. Building Access

- Key Card # _____
- Key Fob # _____
- Parking Permit # _____
- Misc. _____

3. Desk/Office

- Office Key(s)
- Desk Key (s)
- Misc. _____

4. Credit

- "P" Card (Visa Card # _____)
- Any reimbursable expenses outstanding? Yes No
- Outstanding charges: \$
 \$
 \$

Employee Signature: _____