

UNM FOUNDATION
PROPOSAL AND CHECKLIST FOR DONATIONS OF EQUIPMENT AND OTHER
TANGIBLE PERSONAL PROPERTY (excluding real property)
Last Revised 12/01/01

Complete the appropriate boxes below and print the form. Obtain the required signatures and submit the form to: UNM Development Office, 700 Lomas NE Suite #108, Albuquerque, NM 87106

TO: UNM Foundation
Attention: Director of Development

FROM: (Program/Department)
 (Contact)
RE: Proposed Donation of Personal Property/Equipment
DATE:

I. Current Ownership (full name and address of owner/donor):

Name:
Company:
Address:

Telephone: Fax:

II. Description of Property:

Check the type of property being considered for donation

- 1. Artwork
- 2. Collection of Books or Periodicals
- 3. Research-Related Equipment or Supplies
- 4. Equipment or Supplies for Instructional Purposes
- Other:

For items in categories 1 or 2, complete all but sections IV and VI. For items in categories 3 and 4, complete all sections. For "other" items, call the Development Office (277-6543) for appropriate instructions.

List below (or on attached pages) all items of equipment or other personal property proposed to be donated in as much detail as possible, including, but not limited to, such information as manufacturer, brand name, make, model, year of manufacture, size, and estimated fair market value.

Has a representative of the University inspected the property? Yes No
If so, give the name and title of the inspector:

Also, describe the condition of the property (e.g. mint/new/used/well-used) and any specific concerns raised at inspection:

How is/was the property used by current owner/donor?

III. Title Information:

Is the owner/donor the manufacturer or artist? Yes No
How did owner/donor acquire this property?

How long has owner/donor owned this property?

If applicable, has a provenance been obtained? Yes No

If so, please provide a copy of the report.

Does the owner/donor wish to retain an interest in the property (e.g. physical possession, proceeds from copyrights and/or royalties)? Yes No

If so, please describe terms and conditions:

IV. Financial Information:

Is there a recent appraisal of the property? Yes No

If yes, give date and appraised value \$ and name and address of appraiser

Please provide a copy of the appraisal.

Are there any existing liens or security interests against this property? Yes No

If so, please describe:

Has there been a UCC chattel search relating to this property? Yes No

If so, please attach a copy of the report.

Is there pending litigation relating to this property? Yes No

If so, please describe:

Are there any insurance claims made with regard to the use of this property? Yes No

If so, please describe:

Has the property been the subject of any regulatory designations?

Yes No

If so, please list type of designation and regulatory agency:

V. Acquisition:

Where is this property currently located?

How is the property to be delivered to the University?

Is delivery to be at owner/donor expense or University expense? Yes No

If delivery is at University expense, give the estimated total cost: \$

Provide the projected source(s) of payment of such expenses:

Please obtain signature below from authorized signatory on this account.

VI. Environmental and Contractual Issues:

Does the property require review and approval by Risk Management for health or safety concerns as provided for under Section 4 of UBP [POLICY 7110 "Gifts of Tangible Personal Property"](#)? Yes No

Please obtain the appropriate signature from the Office of Risk Management at the bottom of this form or attach assessment or report, if necessary.

Is this donation governed by a contract currently on file with the University? Yes No

If so, attach a copy of the related contract, or provide a description of the contract (including parties to and date of contract):

Does donor require a new contract to be signed relating to this gift? Yes No

If so, please complete and attach the Contract Review Form Exhibit C. of ["Contracts Signature Authority and Review Policy", Policy 2010, UBP.](#)

Does the new or existing contract include an indemnification clause? Yes No

If so, describe extent of indemnification and whether or not the donation will be covered by the University's contractual liability insurance:

Please obtain the appropriate signature from Risk Management indicating that the property can be insured through the University's contractual liability insurance and attach supporting documentation, if necessary.

VII. Disposition:

How does the department/program intend to utilize the property?

Does the owner/donor have any requests regarding disposition of the property? Yes No
If so, explain the request(s) and how the department/program intends to meet these request(s):

Where will the property be located?

Will there be costs associated with initial installation of the property? Yes No

If so, give the estimated total cost: \$ (attach detailed explanation) Provide the projected source(s) of payment of such expenses:

Will there be costs associated with ongoing maintenance of the property? Yes No

If so, give the estimated total cost: \$ (attach detailed explanation) Provide the projected source(s) of payment of such expense:

Please obtain signatures below from authorized signatories on these accounts. Also, please note that, depending on the estimated cost of installation and maintenance, approval of the Regents or the University Administration may also be required per [Regents' Policy 7.13 "Receipt and Investment of Gifts to the University."](#)

VIII. Supporting information available:

Please attach all other information which will help UNM evaluate the property:

- | | | |
|---|---|---|
| <input type="checkbox"/> Contracts | <input type="checkbox"/> Contract Review Form | <input type="checkbox"/> Appraisal(s) |
| <input type="checkbox"/> Lien documents | <input type="checkbox"/> UCC Chattel Search | <input type="checkbox"/> Inventory List |
| <input type="checkbox"/> Risk Management Assessment | <input type="checkbox"/> Photographs | <input type="checkbox"/> Provenance |
| <input type="checkbox"/> Other (please list): | | |

Additional Comments:

SUBMITTED BY:

Signature of Contact: _____

Printed Name and Title: _____ Date: _____

Department/Program: _____

Signature of Contact: _____

Printed Name and Title: _____ Date: _____

Department/Program: _____

APPROVED BY (check all that are applicable)

- RISK MANAGEMENT DEPARTMENT (as to environmental assessment and/or
 as to contractual liability insurance coverage)

Signature of Contact _____

Printed Name and Title: _____ Date: _____

OTHER (If any of the accounts from which expenses relating to this property are to be paid require signature of an individual other than the Department/Program contact and/or the Dean/Director//Vice President who submitted this document, please indicate approval by signature(s) below)

Signature of Contact: _____

Printed Name and Title: _____ Date: _____

Signature of Contact: _____

Printed Name and Title: _____ Date: _____