



## Fair Market Value Approval Form

For Disposal of Surplus Personal Property

<b>Item to be Sold:</b>	
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<b>Description of the Item:</b>	
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<b>Issues/Damages of the Item:</b>	
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<b>Date of Purchase:</b>	
<b>Original Purchase Price:</b>	

<b>Estimated Fair Market Value</b>	
<b>Auction Reserve Price</b>	

**Department Director Signature:** \_\_\_\_\_

**Printed Name/Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### City Manager Approval

☐ Approve – I agree with the fair market value and reserve price of the item.

☐ Deny – I do not agree with the fair market value and reserve price of the item.

Additional Comments:

**City Manager Signature:** \_\_\_\_\_

**Printed Name/Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Include pictures with this form for the City Manager.**