AFFIDAVIT OF ASSET
DESTRUCTION/DISPOSITION STATE OF
WASHINGTON

APPENDIX 6.3.03

Grant County Fire Protection District No. 3

I, _____, being first duly sworn upon oath, state that I have destroyed/disposed of, asset no. _____, in the proper manner detailed below, and that said destruction/disposition was witnessed by_____.

Destruction/Disposition Method:

☐ Sale ☐ Recycled ☐ Thrown Away

Date of Destruction/Disposition: _____

Name of Recycle Service, if applicable: _____

Any additional pertinent information: If sold through a District sale process or action, provide the following detail:

Disposal Business Name: _____

Date Sent: _____

Scheduled Sale Date: _____

Name of Contact:_____

Signed:_____

Subscribed and sworn on this day of _____, _____.

Affiant Signature: _____

Witness Signature: _____