



☐ Gintell (M) Sdn Bhd	☐ Gintell (B) Sdn Bhd	☐ Gintell (Cambodia) Co. Ltd.	☐ Eracare Philippines, Inc.
☐ Gintell Borneo Sdn Bhd	☐ Gintell Properties Sdn Bhd	☐ Gintell Vietnam Co. Ltd.	☐ Eracare Health Mart Vietnam Co. Ltd.
☐ Gintell Rest N Go Sdn Bhd	☐ SOVOTEL Malaysia Sdn Bhd	☐ Gintell Philippines, Inc.	☐ Eracare Health Mart Philippines, Inc.
☐ Gintell (S) Pte. Ltd.	☐ Gintell (Thailand) Co. Ltd.	☐ Eracare Vietnam Co, Ltd.	

FIXED ASSET DISPOSAL / TRANSFER FORM

FOR: _____ DEPARTMENT

Person Request: _____ Mobile Contact: _____

Email: _____

Fixed Asset Physical Location: _____

Description of Item: _____

(such as Model / Serial Number / Color)

Date of Disposal/ Transfer: _____

Quantity Disposed/ Transfer: _____

Type of Disposal/ Transfer: ☐ Write-Off ☐ Trade-in ☐ Transfer

Reason of Write-Off / Trade-in / Transfer: _____

Disposal/ Transfer Value: _____

For transfer only

From Current Department/ Locaion: _____

To New Department/ Location: _____

FOR ACCOUNTS DEPARTMENT ONLY

Date of Purchase:		Original Cost:	
Asset Class:		Net Book Value:	

REQUESTED BY :	APPROVED BY :			
	<u>OVERSEAS COMPANIES</u>	<u>MALAYSIAN COMPANIES</u>	<u>ACCOUNTS DEPARTMENT</u>	<u>MANAGEMENT</u>
	DEPARTMENT (OPERATION):	DEPARTMENT (OPERATION):		
Signature:	Signature:	Signature:	Signature:	Signature:
Name:	Name:	Name:	Name:	Name:
	ACCOUNTS DEPARTMENT:			
	Signature:			
	Name:			
Date:	Date:	Date:	Date:	Date: