**Return of Company Property Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name:** |  | | |
| **Department:** |  | **Employee Name:** |  |
| **Employee ID:** |  | **Designation:** |  |
| **Date of Joining:** |  | **Last Working Day:** |  |

**Section 1: Returned Items Checklist**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sr. No.** | **Description of Item** | **Serial / ID Number** | **Condition (Good/Fair/Damaged)** | **Date Returned** | **Checked By (Name & Signature)** |
| 1 | Laptop / Computer |  |  |  |  |
| 2 | Office Mobile Phone |  |  |  |  |
| 3 | ID Card / Access Card |  |  |  |  |
| 4 | Keys (Office / Locker / Vehicle) |  |  |  |  |
| 5 | Uniform / Safety Gear |  |  |  |  |
| 6 | Company Vehicle |  |  |  |  |
| 7 | Tools / Equipment |  |  |  |  |
| 8 | Documents / Files |  |  |  |  |
| 9 | Credit Card / Fuel Card |  |  |  |  |
| 10 | Other (Specify) |  |  |  |  |

**Section 2: Departmental Clearance**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Department** | **Verified By** | **Signature** | **Date** | **Remarks** |
| IT Department |  |  |  |  |
| Administration |  |  |  |  |
| Finance |  |  |  |  |
| HR Department |  |  |  |  |
| Other (if any) |  |  |  |  |

**Section 3: Employee Declaration**

I, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, confirm that I have returned all company property in my possession and have no outstanding items or dues with the organization.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 4: HR / Supervisor Confirmation**

All company property has been received and verified. The employee has been cleared for final settlement.

**Verified By:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Designation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_