



## Surplus Property Donation Form

Name of Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Name of Representative \_\_\_\_\_ Phone \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Organization Website \_\_\_\_\_

**Applicant Status:** Check all boxes that apply

Public Agency

Non-profit, tax exempt organization: Tax ID Number \_\_\_\_\_

**Please answer the following questions (attach additional sheets as necessary):**

1. **Provide a brief statement on the purpose for which the applicant organization was formed.**
  
  
  
  
  
  
  
  
  
  
2. **List items you are applying for and how donation to your organization will benefit the purpose of your organization.**

**Western Municipal Water District is providing the surplus item(s) as a public service; therefore, the receiving party agrees and understands that such equipment is received “as-is” and that the District makes no warranties, express or implied, regarding the surplus equipment.**

**Representative Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Office Use Only:** Reviewed by \_\_\_\_\_ Date \_\_\_\_\_