

**Office of the Secretary
Office of Facilities and Administrative Services
Annual Personal Property Inventory Certification**

Office:	
Division/Branch:	
Cost Center:	
Office Contact:	Telephone:

CERTIFICATION STATEMENT:

I certify that an Annual Physical Inventory has been conducted of all system-controlled personal property assigned to me as required by Interior Property Management Directive (114-60). The assets for this Cost Center stated above were accounted for on ____ / ____ / ____, and I certify that the inventory (including reconciliations submitted) is true and correct.

The original copy of the physical inventory will be kept on file in my office for future reference, with a copy forwarded to the Office of Facilities and Administrative Services (OFAS) Property Office. I will keep this inventory report on file for three (3) years, or until audited by an Office of the Secretary representative. If applicable, all required documentation associated with the annual inventory is attached (e.g., Receiving Report (DI-102), Report of Survey (DI-103), Certificate of Unserviceable Property (DI-103a), Transfer of Property (DI-104), and any other supporting documents). As the Custodial Property Officer for this Office, I will follow up with OFAS to ensure all asset adjustments are made in the Financial and Business Management System.

Note: When applicable, all firearms were physically checked and accounted for during this inventory.

AUTHORIZED SIGNATURES:

I certify that I have read and understand the duties and responsibilities of an **Accountable Property Officer** – Interior Property Management Directives, Personal Property Administration – Subpart 114.60.1 (a).

Accountable Property Officer: _____
Print Name

Accountable Property Officer: _____ Date: ____/____/____
Signature

I certify that I have read and understand the duties and responsibilities of the **Custodial Property Officer** – Interior Property Management Directives, Personal Property Administration – Subpart 114.60.1 (l).

Custodial Property Officer: _____
Print Name

Custodial Property Officer: _____ Date: ____/____/____
Signature