



# OCONEE COUNTY, SC BUILDINGS

## CAPITAL ASSET CORRECTION

Please enter  
Asset Tag #  
\_\_\_\_\_

**Submitting accurate and timely forms is crucial to providing Council, the Administrator, management, and others with the accurate financial reports.  
PLEASE PROCESS PROMPTLY!**

*This form must be completed when corrections need to be made to an existing asset record.*

Dept. Name/#: \_\_\_\_\_ Correction Date: \_\_\_\_\_

Location/Address: \_\_\_\_\_ Tax Map #: \_\_\_\_\_

Year Constructed: \_\_\_\_\_ Square Footage: \_\_\_\_\_ Construction Type/Material: \_\_\_\_\_

What information is being updated/changed on this asset? (e.g. description, location, serial number, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Original information: \_\_\_\_\_ Updated information: \_\_\_\_\_

Original information: \_\_\_\_\_ Updated information: \_\_\_\_\_

Original information: \_\_\_\_\_ Updated information: \_\_\_\_\_

Reason for the change or update of information for this asset: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Notes/Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

### Finance Use ONLY

Entered in CSI by: \_\_\_\_\_ Date: \_\_\_\_\_

Finance Notes: \_\_\_\_\_  
\_\_\_\_\_