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| **Asset Holder Name** (Department /Vessel ) Name  **:** | | | | | | | | |
| Asset Manager Name: | | | | | | | | |
| Asset Review Date : | Date | | | | Sign (Digital sign) | | | |
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| **Asset Description** | | | **Asset Number** | **Date of purchase** | | **Asset Value (At the time of Purchase)** | | **Asset Physical Condition** |
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**Obsolete/Transferred Assert**

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| **Asset Description** | **Asset No.** | **Date Issued** | **Asset Value (At the time of Issue)** | **Obsolete/ Transfer** | **Date of disposal/ Trasfer** | **Transferred to (If applicable)** |
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