

# UNM Surplus Property Hard Drive Erasure Certification

Date: \_\_\_\_\_

To: UNM Surplus Property Department  
Fax to 277-1130 (Original to be picked up with equipment)

From: \_\_\_\_\_  
(Department Name: Printed or Typed)

\_\_\_\_\_  
(Name: Printed or Typed)

\_\_\_\_\_  
(Title: Authorized Signature for Department or  
IT Person Responsible for erasure)

\_\_\_\_\_  
(Signature)

I certify that the hard drive(s) in the following computer(s) have been erased by (check **one**):

1. using a commercial degaussing product to erase magnetic disks \_\_\_\_\_
2. overwriting stored data a minimum of five times \_\_\_\_\_
3. reformatting the drives ("F dinking") \_\_\_\_\_

**OR**

I certify that the hard drive(s) in the following computer(s) have been removed to be reused within the department \_\_\_\_\_.

I certify that the hard drive(s) in the following computer(s) have been removed to be destroyed \_\_\_\_\_.

UNM ID NUMBER

SERIAL NUMBER

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