

To remove recovered inventory from an individual's record, please complete this form and send to OVRInventory@ky.gov. If you indicate that the inventory is still usable, it will be placed on an available inventory list for redistribution.

* Indicates a required field

1. INDIVIDUAL INFORMATION

*First Name	Middle Initial	*Last Name	* Date
* Counselor First Name	Middle Initial	*Last Name	* Case Number
* Caseload			

2. EQUIPMENT INFORMATION

Description of item(s)

Item	Authorization Number	Serial Number/Item Number	Condition
* 1.	*	*	*
2.			
3.			
4.			
5.			

Comments

The Kentucky Office of Vocational Rehabilitation (KYOVR) does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, gender identity or expression, ancestry, age, pregnancy or related medical condition, marital or familial status, disability, veteran status, political affiliation, or genetic information in accordance with state and federal laws.

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