

University Capital Equipment Fabrication Form

Complete this form when fabricating a system or apparatus from components, which otherwise may not be considered a capital asset.

Request Date:

Custodian Info:

Custodian/PI Name:

Employee ID:

Contact for Questions:

Phone:

Dept Info:

Dept Name:

Dept ID:

Asset Info:

Approximate end value of equipment: \$

Approximate In Service date: (mo/yr)

In Service Asset will be located in: Bldg:

Room:

Fabrication
Description:

Provide the description of the fabricated capital equipment:

Will the capital equipment be owned by the University?

Chartfield Info:

Pre-assigned Asset ID#

Profile assigned (Item Category):

NOTE:

Accounting Services will provide the Asset ID and Profile to use for this fabrication. Please advise your department accountant and Procurement Specialist to reference the pre-assigned Asset ID and Item Category/Asset Profile on all Purchase Orders, Receipts, Vouchers and Invoices.

Certified approver:

If using sponsored funds

(Signature)

Unit/Department approver:

If using non-sponsored funds

(Signature)

Email this form to: controller@umn.edu Phone:612-624-1617