



FIXED ASSET NEW ASSET FORM

Requester's Name: _____

Date: _____

1. ASSET DETAIL:

Item Description: _____

Cost \$ _____

Purchase Order Number: _____

Cost Center: _____

Asset Tag#: _____

Date Received: _____

Make/Model: _____

Serial Number: _____

Room#: _____

Campus Location: _____

2. ASSET DETAIL:

Department Contact's Name: _____

Date Received: _____

3. COMMUNICATION DETAIL:

Plant Ops (Signature): _____

Date: _____

For Fixed Asset Dept. Use Only

Processed by: _____

Date: _____

Asset ID: _____

Asset Total Cost: _____

Asset Class: _____

Spend Category: _____

Vendor Name: _____

Line Item(s): _____

Grant (if applicable): _____

Invoice: _____

Comments: