## ASSET PURCHASING INFORMATION FORM

1. Which budget unit will be the custodian for this asset?

Dept. Name: $\qquad$
Coordinating-
Cost Center \# $\qquad$
Ext: $\qquad$
Dept. Contact: $\qquad$
Office Address: $\qquad$
2. Where will the asset be located?

Building: $\qquad$ Room: $\qquad$
3. Is this asset a component of or related to an existing asset or replacement of a part for an existing asset?

$\square$ No If yes, what is the existing asset's tag number?

Does the new asset extend the life of the related asset? $\square$ Yes $\square$ No If yes, approximately how many years will be added to the life of the related asset?
4. Are additional components of this asset being ordered on separate purchase requisitions?

Ifyes: Purchase Requisition \#:
Additional Component Description:
$\square$ No
$\qquad$
5. Mark the category below that best describes this asset:Agricultural, Electrical \& Mechanical Equip.
Automobiles \& ATV's
Bus
Computer Hardware/Peripheral Equip Computer Software
Construction Equipment
Fire Arms \& Equipment
Marine \& Watercraft
Medical Equipment
Office Furniture \& Fixtures

Please complete this form, save it and attach it to the Workday Requisition.

