



Form Rules and Guidelines:

The requester **MUST complete this form for all equipment that has an **engine/motor**, regardless of cost.*

For equipment without an engine/motor that costs less than \$10,000, the requester **DOES NOT need to complete this form.*

****ONLY** equipment with an engine/motor needs the additional review and signature of UC ANR's equipment asset representative, currently the **Director of Risk & Safety Services**. Otherwise, there is no need for their approval.*

Review and approval **REQUIRED by the **Director of Resource Planning & Management** on asset purchases \$50,000 and greater.*

Capital equipment is referred to as free standing equipment that becomes part of inventory and has a useful life greater than one year.

This form is limited to one asset type, plus all attachments and accessories related to acquisition.

Attachments and accessories with a cost of \$10,000 or more, that are being acquired to use with existing equipment, are considered capital equipment and this form should also be used for these types of requests.

Equipment Description: Fully describe the equipment, including specific year, make and model. Please include a quote, if available. **Estimated Total Cost should be inclusive of tax, license, delivery, installation, and shipping fees.**

Qty	
Year	
Make	
Model	
Description	
GVWR	
Engine Type	
EPA Emission Standards	
Estimated Total Cost	

Justification:

Please provide reasonable details for resource management purposes. Specifically, how this equipment improves efficiency, improves safety, replacement equipment that is beyond useful-life or cost prohibitive to repair.

Source of Funds:

Describe the source of the funding for the acquisition. All grant-related requests must include the grant account and end date.

Request Process:

The request process is expected to take 3 business days, with the goal of replying timelier when possible. If this request is for an urgent need, please describe the purpose below.

Expedite Request:

Only if applicable – please describe why this request is urgent below, for example, equipment in use for harvest broke and is beyond repair and need replacement as soon as possible to fulfill promises made to researcher.

Submission Request:

Date: _____

REC Director

Workflow: REC Director => Risk and Safety Services (if necessary) => REC AO Financial Control => Director REC System => and Director RPM (if necessary). Please sign and forward to next signature review, copying requesting REC's Business Officer. Completed form should be archived in REC's MS Teams folder labeled 'Completed Purchase Requests'.



Comments/Approvals: *only needed if equipment has an engine/motor, regardless of cost*

Director, Risk and Safety Services Comments:

Director of Risk & Safety Services

REC AO Financial Control Representative Comments:

REC AO Financial Control Representative

Director, REC System Comments:

Director, REC System

Review required on asset purchases \$50,000 and greater

Executive Director, Resource Planning and Management Comments:

Executive Director Resource Planning & Management

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