



UNIVERSITY of VIRGINIA

Request to Fabricate Capital Equipment

Must meet all 4 asset criteria on page 2

FABRICATION ASSET #:
(Fixed Assets Accounting will assign)

Principal Investigator

PATEO(s):

Short Name of Equip. being Fabricated:
(for easy identification)

Reason for Fabrication & Description of Equipment:

Projected Date (Month/Year) When Equipment will first be functional:

Projected Date (Month/Year) When Fabrication will be Finished:

Estimated Total Dollar Value when Finished:

Estimated Useful Life Span of Equipment (No of Yrs):

Location of Equipment

Date:
(Signature – Principal Investigator)

Date:
(Signature - Chair)

Date:
(Signature - Office of Sponsored Programs)

Date:
(Signature - Fixed Assets Accounting Group)

PLEASE NOTE: 1) No expenditures for fabricating capital equipment will be allowed until this form has been approved as indicated in the policy. 2) Following approvals, all purchase requisitions/Purchase orders MUST refer to the fabricated asset # or they will be disallowed.

Determination of Fabrication Equipment to be a Capital/Fixed Asset

Please check box for each of the four criteria below:

YES **NO**

- | | | |
|--|--------------------------|--------------------------|
| 1. The cost of the fabrication equipment will be a minimum of \$5,000 upon completion | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The fabricated equipment will have a useful life of greater than one year | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The fabricated equipment will be titled to or owned by UVA | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. The fabricated equipment will function as a standalone item or as integral part of a larger UVA-owned system. | <input type="checkbox"/> | <input type="checkbox"/> |

Revised March 9, 2011