

PROPERTY CONTROL CAPITAL ASSET ACCOUNTING

PHONE: (480)965-8371 FAX: (480)965-2683 MAIL CODE: 5812

Off-Campus Use of Equipment Authorization

This form applies to all University and sponsor-owned equipment being temporarily removed from ASU, or which is permanently located at a site not owned or leased by ASU. This authorization is valid for up to two years but may be renewed by submitting a new form.

NOTE: If the equipment satisfies the capital equipment criteria as defined in <u>PCS 101</u> and a Property Control Number is not affixed to the equipment, please contact Property Control immediately.

Number is not affixed to the equipment, please contact Property Control immediately. If capital equipment is listed, be sure to send a completed copy to Property Control in order to satisfy inventory requirements: Campus Mail: MC 5812 - 1 Fax: (480)965-2683 Email: property-q@asu.edu **Equipment Information:** Condition Model Manufacturer ASU PC# **Description of Equipment** Serial Number **Equipment Location Information:** Complete Address/Site Description: Responsible Individual: _____ ASURITE ID: _____ Signature: Date: Department Name: _____ Expected Date of Return: _____ Authorization (Dean, Chair, or Department Head ONLY): Name: ______Title: _____ Signature: Fill out and submit the following section only ONCE THE EQUIPMENT HAS BEEN RETURNED TO ASU Equipment Returned: **ASU PC#** Condition **NEW LOCATION Description of Equipment** Confirmation (Dean, Chair, or Department Head ONLY): Name: ______ Title: _____ Signature: Date;