



Fabricated Equipment Form for Departmental Documentation

Complete this form, including signature by Principal Investigator (PI). Send the completed and signed copy to Inventory Control, inventorycontrol@umd.edu, and retain a copy in the department's records for the appropriate Workday(?) file for this fabricated equipment.

PI Name

PI Department

Departmental Administrator responsible for tracking Fabricated Equipment

Description of Fabricated Equipment and Use

KR Award ID

Asset Number (generated by Inventory Control)

Total expected value of Fabricated Equipment upon completion \$

Length of time expected to fabricate asset

In service date (fabrication complete and depreciation starts)

Equipment tag number (provided by Inventory Control)

Building Number and Room Number where equipment will be located

It is the responsibility of the PI to determine that funds are available for fabricated equipment, and the sponsor has approved the costs for fabricated equipment either in the initial proposal to the sponsor or via a revised budget action in accordance with sponsor's guidelines. The undersigned certifies that the information contained in this form is true and accurate and in accordance with the scope and objective of the award and in compliance with the award's Terms and Conditions and University policies.

PI Signature

Date