

University Libraries Equipment Request Form

***This form is for items costing more than \$500 each. For items costing less than \$500, please use the Special Supplies Request form & submit it to the Libraries Administration Office.*

DEPARTMENTAL PRIORITY (<i>Circle one</i>)						
Highest	1	2	3	4	5	Lowest

From: Department/Branch: _____ Date: _____

Name/Description of Item: Please include all pertinent data; the exact name as shown in catalog, *etc.*
A copy of the appropriate page from a catalog, brochure, or website would be very helpful.

Vendor Name/Address:

Size: _____

Unit: (*i.e. box, each, 25, 100*) _____

Color: _____

Price per unit: _____

Date or # of Catalog: _____

Any **Estimated** Additional Associated Costs:
(*e.g. shipping, etc.*):

Item # in catalog: _____

Quantity of units needed: _____

Page # in Catalog _____

Total estimated cost: _____

Justification:

Dept. Head / Senior Branch Librarian Approval

Date

Committee Recommendation:

Date