

General Information

Program/Department	<input type="text"/>
Site	
Area (Building - Floor - Room)	<input type="text"/>
Company - Accounting Unit (ie. 2 - 64)	<input type="text"/>
Research Activity	<input type="text"/>
Principal Investigator	<input type="text"/>
Prepared By	<input type="text"/>
Preparer contact (email)	<input type="text"/>

Equipment Request Details

Equipment Item

Item Description

Is the requested equipment **net new** (i.e. increasing the size of the current fleet or never previously owned by the program) or **replacement** (i.e. phasing out existing equipment)?

New Replacement

If replacement, what is the age of the equipment item that is being replaced (in years)?

What is the expected useful life of the requested equipment (in years)?

Are there any building/space or IT-related impacts associated with this equipment?

Yes No

Cost Details

Number of Units Required	<input type="text"/>
Total Unit(s) Equipment Cost <i>(CAD Equivalent - Before Tax)</i>	<input type="text"/>
IT Cost <i>(CAD Equivalent - Before Tax)</i>	
Redevelopment Cost <i>(CAD Equivalent - Before Tax)</i>	
Other Cost <i>(ie. Delivery, Installation, Training, etc.- Before Tax)</i>	<input type="text"/>
All in Cost	<input type="text"/>
Operational Cost Impact (CAD Equivalent) <i>ie. service, consumables, etc.- Before Tax</i>	<input type="text"/>

Research Finance Pre-Approval

For research funded only. Please send to Research Finance when above is complete.

(Sr.) Research Financial Analyst	<input type="text"/>
Signature	<input type="text"/>