



Department of Administrative Services
Office of Asset Management
Asset Equipment New Item Form
Form A-1 - Forms and Policies can be found at ucnj.org/assets

Use this form when new equipment is purchased. This form must be submitted per item. After filling out this form, press File, then Save As to create duplicates when applicable to save you time.

This form is for non-auto related purchases

COUNTY ID	<input type="text"/>
MAKE	<input type="text"/>
MODEL	<input type="text"/>
DESCRIPTION OF ITEM	<input type="text"/>
SERIAL OR VIN	<input type="text"/>
COST	<input type="text"/>
BUILDING / LOCATION	<input type="text"/>
LOCATION DESCRIPTION	<input type="text"/>
PURCHASE ORDER NUMBER	<input type="text"/>
ORDER DATE	<input type="text"/>
CHECK NUMBER	<input type="text"/>
VENDOR	<input type="text"/>
WARRANTY BEGIN DATE	<input type="text"/>
WARRANTY END DATE	<input type="text"/>
ACCOUNT NUMBER	<input type="text"/>
ASSET TYPE	<input type="text"/>
FIXED ASSET OVER \$5,000?	<input type="text"/>
FUNDS CHARGED	<input type="text"/>