I. Equipment Information
   
a. Name of equipment/system
   b. Location(Building Name & Room #)
   c. Estimated total cost
   d. Responsible Department/Org. Name ________________________ Number __________________
   e. Start Date __________________ Estimated Completion Date __________________
   f. Check here if change to existing fabrication ________
      Reason for change __________________________________________
   g. Upon completion will equipment remain at Rice? yes ______ no ______
      (if no where will it be shipped?) ______________________________________

II. Cost/Budget Information - Major Components

<table>
<thead>
<tr>
<th>Description</th>
<th>Manufacturer(s)</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other &lt; 5,000.00 each</td>
<td></td>
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</tbody>
</table>

Note: This amount must agree with item c. above

Total

III. Funding Sources - for dedicated Fabrication Funds

<table>
<thead>
<tr>
<th>Controller’s use only</th>
<th>Fabrication Fund #</th>
<th>Fund #</th>
<th>Org. #</th>
<th>Acct. #</th>
<th>Amount</th>
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</thead>
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</table>

Note: This amount must agree with item c. above

Total

(Controller’s Office will process the budget transfers after fabrication fund numbers are assigned. Department will be notified of new fund number(s).)

IV. Acknowledgements/Certifications

a. Items charged to the fabrication fund(s) will comply with Purchasing Policy for component parts in accordance with Policy No. 814, Policy No. 809-79 and Purchasing & Payment Manual sections 11 and 12.

b. I understand component parts are integrated parts of the fabrication and cannot be used independently.

c. Only items meeting these guidelines will be charged to fabrication fund(s).

d. I understand I am responsible for ensuring correct coding.

e. I understand that the appropriate F & A will be charged for non-capital account codes.

Authorized Signature(s) ______________________ Date ____________

Department Chair ______________________ Date ____________

Printed Name(s) __________________________________________________________________________

Forward completed form to Property Accounting-MS70

Reviewed by:

Property Accounting ______________________ Research Accounting ______________________

FTMFUND _______ FRAGRNT _______ FRMFUND _______ FOATEXT _______ MEMO _______ JV _______

revised 01/08 ph-j