

# Equipment Capitalization Notice

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Date: \_\_\_\_\_

To: Research Section  
Arkansas Department of Transportation  
P.O. Box 2261  
Little Rock, AR 72203-2261

Subject: Receipt of Non-Expendable Equipment for Project \_\_\_\_\_

This is to notify ARDOT that \_\_\_\_\_ is now in possession the equipment listed below.

Name of Equipment: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Model Number: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Supplier: \_\_\_\_\_

Amount of purchase: \_\_\_\_\_

Location of Equipment: \_\_\_\_\_

We hereby certify that the cost of this equipment is not included in indirect costs.

\_\_\_\_\_  
Principal Investigator

\_\_\_\_\_  
Department Head

Date:

Date:

Note: All non-expendable equipment will be capitalized by the Arkansas Department of Transportation, not by the research Contractor.

This form must be submitted through Doc Express with invoice attached.

<b>Internal Use</b>	
ARDOT assigned number:	