

Equipment Capitalization Notice

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.

Internal Use	
ARDOT assigned number:	