

Colorado State University Off-Campus Equipment Check-out Worksheet

The following piece(s) of equipment are assigned to your custody at a location other than the CSU Campus. Please fill out all fields on this form. Use one worksheet per Responsible Person; additional assets may be added to this sheet during the year. There is room on this form for 2 assets; if this responsible person has or adds additional assets, check the "Listing Attached" box below and attach off campus continuation pages. **This Form must be updated annually by the Department Property Contact (DPC).** One form is good for 4 years then a new form must be generated for all assets off campus for this responsible person. If the information becomes illegible, a new form must be generated.

The "Responsible Person" shall be the CSU Employee listed in the "Responsible Person" field of the record in the property management system. This is the person responsible for the equipment. If the item is government-funded, the Principle Investigator (PI) should be listed as the Responsible Person. By signing this form, the responsible person certifies the equipment is physically verified and the information listed is current, accurate and complete. If the "Asset User" is also the responsible person, write "Responsible Person" in the asset user field.

Listing Attached (__ of __)

Responsible Person Printed Name:	Responsible Person Signature:	Responsible Person Title:	Responsible Person Phone:
Responsible Person Email:	Date:	Responsible Person On-Campus Office Location:	Responsible Person Department Name:

Off-Campus Asset User:		Relationship to Responsible Person:		Is this a private residence? (circle one)	
				YES	
Off-Campus Location/Address (NO PO BOX) Please include zip code:				NO	
Phone Number:	Department Number:	Date added:	Status &Condition (PROPERTY USE ONLY):	E-Mail Address:	
CSU ID Tag Number:	Description:		Year Manufactured:	Manufacturer:	
Model Number (Use Manufacturer's):		Serial Number:		Asset returned to Campus	
				Date: Disposed: Y N	

Off-Campus Asset User:		Relationship to Responsible Person:		Is this a private residence? (circle one)	
				YES	
Off-Campus Location/Address (NO PO BOX) Please include zip code:				NO	
Phone Number:	Department Number:	Date added:	Status &Condition (PROPERTY USE ONLY):	E-Mail Address:	
CSU ID Tag Number:	Description:		Year Manufactured:	Manufacturer:	
Model Number (Use Manufacturer's):		Serial Number:		Asset returned to Campus	
				Date: Disposed: Y N	

Initial form created:		1st Annual Verification Performed:		2nd Annual Verification Performed:		3rd Annual Verification Performed:	
Date:	DPC Initials:	Date:	DPC Initials:	Date:	DPC Initials:	Date:	DPC Initials:

Colorado State University Off-Campus Equipment Check-out Worksheet Instructions

Purpose: All equipment located off-campus must be documented and accounted for during the physical inventory process. If you have CSU, sponsor or government-owned equipment at a non-CSU location, you must complete an Off-Campus Equipment Check-out Worksheet. Use one worksheet per Responsible Person (there is room for multiple Asset Users who may not be the responsible person); additional equipment may be added during the course of the year.

Listing Attached: If additional pages are attached for this responsible person, check this box. When copies are given to the Property Management Office indicate how many pages are attached.

Annual Update: Physical verification must be performed annually by the Department Property Contact (DPC) for all off-campus assets. There is room for three Annual Updates on this form. After four years (initial year plus three updates), please fill out a new form.

Who may fill out this form? The responsible person for the equipment should fill out the form. The DPC may also fill out the form; regardless of who performs this task, the information should be physically verified against the equipment for accuracy. If there is a discrepancy, the person who signs the form (Responsible Person) will be responsible. The responsible person information is listed at the top of the form; if the responsible person is not the asset user, that information is listed with each piece of equipment.

Retention: The DPC must retain a copy of this form at all times. It may be audited at any time by Property Management or external auditors with Property Management permission.

Off-Campus Asset User: Completely fill out the information about the person using the equipment. If the asset user is also the responsible person, then you can simply print "RESPONSIBLE PERSON" in this field and bypass the "Relationship to Responsible Person", "Phone Number", and "E-Mail Address" fields.

Relationship to Responsible Person: If the asset user is not the responsible person, then list the relationship (ie: Graduate Student, Temporary Employee, etc.)

Off-Campus Location/Address: This is the street address, including city, state and zip code, where the asset resides. ***NO PO Boxes please!*** Please indicate in the adjacent field whether or not this address is a private residence or not, to ensure privacy of information.

Phone Number: Daytime phone number

Status & Condition: (Status 0=Not In Use, 1=In Use) (Condition 1=Operational, 2=Needs Repairs, 3=Beyond Repair) These should reflect the corresponding fields in the property record in the property management system.

Date Added: This is the date you added this asset to the form.

Steward: The Department name from the Property Record in the property management system.

CSU ID Tag Number: The bar code listed on the CSU tag on the equipment.

E-mail Address: Email address of the Asset User

Year Manufactured: The year this piece of equipment was manufactured (if known) - should be on the data plate on the equipment.

Description: What the item is - this is the "Official Name" in the property record.

Manufacturer: Who manufactured the item - this is in the Manufacturer field in the property record.

Model Number: Manufacturer's model number off the data plate on the equipment, this is in the Model field of the property record.

Serial Number: Serial number off the data plate on the equipment - this should match the Serial Number field in the property record.

Asset returned to Campus: If the asset is returned to campus for disposal (or scrapped on site) or transferred to another department or employee, indicate the date of this transaction on the form; if a disposal was involved, indicate Y or N.

Initial Form Created: Date the form was initially created for this responsible person.

Annual Verification Performed: The DPC is required to verify once per year that this equipment is still in the locations listed on the form. They check the box when this is complete.

Date/DPC Initials: The DPC is required to initial the form upon receipt. Additionally, they will initial annually when the form is updated.

Colorado State University Off-Campus Equipment Check-out Worksheet - Continuation Page _____ of _____

Off-Campus Asset User:			Relationship to Responsible Person:	Is this a private residence? (circle one)
				YES
Off-Campus Location/Address (NO PO BOX) Please include zip code:				NO
Phone Number:	Department Number:	Date added:	Status &Condition (PROPERTY USE ONLY):	E-Mail Address:
CSU ID Tag Number:	Description:		Year Manufactured:	Manufacturer:
Model Number (Use Manufacturer's):		Serial Number:		Asset returned to Campus
				Date: Disposed: Y N

Off-Campus Asset User:			Relationship to Responsible Person:	Is this a private residence? (circle one)
				YES
Off-Campus Location/Address (NO PO BOX) Please include zip code:				NO
Phone Number:	Department Number:	Date added:	Status &Condition (PROPERTY USE ONLY):	E-Mail Address:
CSU ID Tag Number:	Description:		Year Manufactured:	Manufacturer:
Model Number (Use Manufacturer's):		Serial Number:		Asset returned to Campus
				Date: Disposed: Y N

Off-Campus Asset User:			Relationship to Responsible Person:	Is this a private residence? (circle one)
				YES
Off-Campus Location/Address (NO PO BOX) Please include zip code:				NO
Phone Number:	Department Number:	Date added:	Status &Condition (PROPERTY USE ONLY):	E-Mail Address:
CSU ID Tag Number:	Description:		Year Manufactured:	Manufacturer:
Model Number (Use Manufacturer's):		Serial Number:		Asset returned to Campus
				Date: Disposed: Y N