



ORG. # \_\_\_\_\_

FORM P-2

## OFF-GROUNDS CAPITAL EQUIPMENT CERTIFICATION (P-2) FORM

*(NOTE: Updated P-2 Form needs to be resubmitted annually)*

I certify that the equipment listed below is at my residence or another off-grounds location, and is being used in a manner consistent with the purpose, mission and goals of the University.

(See <https://policy.itc.virginia.edu/policy/policydisplay?id=PRM-011> for policy and more information)

**Name of the Institution / Person and Physical Address (NO P.O. Box #'s) of who has the equipment and where it is located:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ **Date Asset to be returned**

\_\_\_\_\_ **Asset tag number**

\_\_\_\_\_ **Serial Number**

\_\_\_\_\_ **Model**

\_\_\_\_\_ **Manufacturer**

\_\_\_\_\_ **Description**

\_\_\_\_\_ **Name of Person Responsible for the Equipment**  
(Please Print or Type)

\_\_\_\_\_ **Signature**

\_\_\_\_\_ **Title**

\_\_\_\_\_ **Date**

**I APPROVE THE LOCATION OF THIS EQUIPMENT.**

\_\_\_\_\_ **Name of Chair/Dean**  
(Please Print or Type)

\_\_\_\_\_ **Signature**

**RETURN FORM TO YOUR ORG'S PROPERTY CONTACT:** \_\_\_\_\_

*(Please Print or Type Property Contact's Name)*

Once completed please forward a copy to: **Mike Williams, Inventory Coordinator, Fixed Asset (Property) Accounting**  
mail to **P.O. Box 400194 Carruthers Hall**, fax to **982-2163**, or email to [mikew@virginia.edu](mailto:mikew@virginia.edu)

**Please retain a copy in your files!**