

## Fixed Asset Data Collection Form

New Asset ☐

or Modified Asset

Asset No: 

Project / Work Order: 

Project Start Date:  /  / 

Campus: 

Location / Building: 

Grid Ref: 

Floor Level: 

Room Number: 

Asset Description: 

Supplier: 

Brand: 

Model: 

Serial No: 

Comments: 

Purchase Date: 

Warranty Period (Yrs/Mths): 

Purchase Price (if known): \$ 

(GST Exclusive)

Installation Date:  /  / 

Commissioned Date:  /  / 

Certificate No: 

Test No: 
*(These two items are required if "Hazardous Plant" has been installed as part of the project)*

Installation Date:  /  / 

Commissioned Date:  /  / 

Was an asset removed as part of the project? (Yes/No): ☐

Asset No: 
*(Note: An Asset Disposal Form must be completed for all removed assets indicating the disposal process)*

Details listed by: 

(Name - Please print)

### Commercial Services and Development Use Only

School or Section Ownership 




Condition
Criticality:
System ID
Maintainable:

Excellent  
Fair  
Good  
Not Known  
Poor  
Very Good

5 = Essential  
4 = Important  
3 = Desirable  
2 = Non Essential  
1 = Not Required

I = Individual  
S = System or Group  
U = Unit or Assembly

Yes or No

Maintenance Centrally Funded? Y/N ☐

Asset Group: 

PESHFM? Y/N ☐

Asset Description: 

Hazardous Plant? Y/N ☐

Equipment ID: 

Details Completed by: 

(Name - Please print)

Asset Number: 

(Asset Officer to complete)

PESHFM=Prescribed essential safety and health features and measures maintenance