

Property Accounting Contract Approval / Routing Form (PA-CARF)

Section 1 - Contract

Equipment Loan Permanent Equipment Transfer

Contract Category: New Contract Amendment # _____

Contract Type: _____

Contract Sub Type: _____

Chart: _____ Org: _____ Total Equipment Cost: _____ Number of Items: _____

Start Date: _____ End Date: _____

of Renewals: _____

Document Source:

Template No Changes (*sign in section 7, Property Accounting*)

Template with Changes

Other Party Agreement (*if non-sponsored: sign in section 6, CSO; if sponsored: sign in section 5, post-award*)

Section 2 - Contracting Party

Name: _____ Contact: _____

Phone Number: _____ Email: _____

Address: _____ City: _____ State _____ Zip Code _____

Section 3 - Unit Information

Name: _____ Contact: _____

Phone Number: _____ Email: _____

Address: _____ City: _____ State _____ Zip Code _____

Section 4 - Required Approvals

Unit Head Printed Name: _____ Signature / Date: _____

Dean Printed Name: _____ Signature / Date: _____

Section 5 - Additional Required Approvals for Sponsored Equipment

Primary Investigator
Printed Name: _____ Signature / Date: _____

Select Office: _____

Printed Name: _____ Signature / Date: _____

Section 6 - Additional Required Approvals

For Export-Controlled and/or International Transfers/Loans or if you indicated you didn't know if equipment was Export-Controlled:

OVCR Compliance Officer
Printed Name: _____ Signature / Date: _____

For Sponsored Research and Other Sponsored Activity Transfers. Verification that transfer conforms to sponsor's terms:

Vice Chancellor for Research (UIC Only)
Printed Name: _____ Signature / Date: _____

Section 7 - Property Accounting Approval

Verification of accuracy of Schedule of Equipment and completion of all approvals:

Property Accounting Manager
Printed Name: _____ Signature / Date: _____

Section 8 - Final Approval

University Comptroller
Printed Name: _____ Signature / Date: _____

University Counsel
Printed Name: _____ Signature / Date: _____

University President
Printed Name (if payable \$250K+): _____ Signature / Date: _____