

Asset Replacement Acquisition Request

Date: _____

Requestor Name _____

Department _____

Contact Information _____

Asset Details (to be replaced)

Asset Name _____

Asset Tag / Serial No. _____

Date Acquired _____

Current Condition _____

Reason for Replacement _____

Requested Replacement Asset

Type / Model _____

Specifications _____

Estimated Cost _____

Preferred Vendor(s) _____

Justification _____

Approval

Supervisor Name &
Signature _____

Date _____

Finance/Procurement
Approval _____

Date _____

Important Notes:

- Complete all requested information before submitting this form.
- Asset replacement requests should be justified with clear reasons.
- Attach supporting documents such as photos, repair reports, or quotations if available.
- Supervisor and finance approvals are mandatory prior to procurement processing.
- This document is for replacement, not for new asset acquisition requests.