

# TENNESSEE STATE UNIVERSITY

## REQUEST FOR COPYING EQUIPMENT

### PART I

(To be completed by department)

Department: \_\_\_\_\_ Requester: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Building: \_\_\_\_\_ Key Operator: \_\_\_\_\_  
Desired Features:  Standard  Special (place on purchase requisition)  
Current Monthly Usage: \_\_\_\_\_ Annual Maintenance Cost: \$ \_\_\_\_\_  
Paper Cost: \$ \_\_\_\_\_ Other Supplies: \$ \_\_\_\_\_  
For Department use only:  Yes  No If no, indicate who: \_\_\_\_\_  
Future Monthly Volume: \_\_\_\_\_ Future Annual Maintenance Cost: \$ \_\_\_\_\_  
Estimated Paper Cost: \$ \_\_\_\_\_ Other Supply Cost: \$ \_\_\_\_\_  
Desired Copy Volume:  Desktop  Low  Mid  High  
(500-5K) (3K-20K) (5K-40K) (5K-50K)  
Copier to be purchased from:  Restricted Funds  Unrestricted Funds  
Can copying needs be obtained elsewhere in the same building:  Yes  No  
Copier:  New  Replacement  Upgrade Trade-in:  Yes  No

Provide a brief substantial reason for request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PART II

(To be completed by Purchasing and Business Services.)

Building Designated as:  Copy Center  Non-Copy Center  
Building: \_\_\_\_\_ Room: \_\_\_\_\_  
Copier Volume in place:  Desk Top  Low  Mid  High  
Number of Users: \_\_\_\_\_ Copier User Capacity: \_\_\_\_\_  
Copy Center copier adequate to meet needs of building occupants:  Yes  No  
Total number of copiers in building including this purchase: \_\_\_\_\_  
Will purchase of copier be cost effective?:  Yes  No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PART III - APPROVAL

Recommend Approval [ ] Disapproval [ ]	
By: _____	Date: _____

Approval [ ] Disapproval [ ]	
By: _____	Date: _____

Comments: \_\_\_\_\_  
\_\_\_\_\_