

Auditor-Controller-Treasurer-Tax Collector Capital Asset - Additions Form

Form used to support Capital Asset additions including new purchases or M&E asset improvements

Asset Tag No. Assigned¹ _____

Asset Title/ Description _____

Date of Purchase/ Received _____ Date placed in Service² _____

Current Claim and Use Tax amount _____ Cumulative Cost _____

Acquisition Type Purchased Donated Constructed
 Leased (Include lease) Financed Purchase (Include agreement)

Contact Person/Custodian _____ Phone Number _____

AM Business Unit _____ Asset Class³ _____ Asset Type³ _____

Asset Profile _____ Estimates Asset Useful Life _____

Asset Purchaser: Fund ID _____ Department ID _____

Asset User⁴: Fund ID _____ Department ID _____

Physical Location of Asset _____

VIN/Serial Number _____

Model/Version _____

Project number⁵ _____

Grant Funded Yes No (if yes, Federal State Other)

If Grant funded define disposition requirements _____

New or Addition New Addition Replacement⁶

If an addition to or replacement⁶ of an existing asset provide the existing Asset's EFS# or tag # _____

If this asset is a Parent/Child relationship existing Parent's asset tag # _____

EFS Document No. (PO or Voucher # if known) _____

Refer to the County's Fiscal Policy Manual FA-1 *Accounting for Capital Assets*.

Direct questions to ACTTC-GeneralAccounting@sonoma-county.org

- For Sonoma Water assets contact Marcus Desideri at Marcus.Desideri@sonoma-county.org or 707-565-3653.

1. Request Tag # from ACTTC-GeneralAccounting@sonoma-county.org if not assigned otherwise by Fleet (Vehicles), ISD, or Transit.

2. If different from date of purchase.

3. Refer to Fiscal Policy Manual FA-1 Accounting for Capital Assets Section D for Class and Type.

4. Applies to Fleet vehicles.

5. Project number assigned by department, ie. General Services-Architect and Transit.

6. If this is a replacement item, complete the Capital Asset Adjustments Form to dispose replaced item.