Maintenance/ Repair Cost Allocation Documentation Form

THE OHIO STATE UNIVERSITY

Office of Sponsored Programs 1960 Kenny Road, Columbus, OH 43210-1016

Instructions

This form is required for the purchase of maintenance and repairs. Completion of this form provides documentation to support the allocation of costs for maintenance agreements or repairs charged to a project based on proportional use and cost.

Equipment Information

Equipment Description	Serial Number	Model Number
Location of Equipment	Sponsored Programs or Ohio State Pro	perty Tag Number

Contact Information

Principal Investigator Name	Principal Investigator Phone	Principal Investigator Email
Department Contact	Department Contact Phone	Department Contact Email

Usage Information

Will the cost of the maintenance/repair be shared by more than one project	No If no, complete the Sole Usage Section
and/or with an Ohio State department(s)?	Yes If yes, complete the Shared Usage section

Sole Usage

I certify that, to the best of my knowledge, the Office of Sponsored Programs project noted in this form has 100 percent use of the equipment.	
Project Number	Requisition Number

Principal	Investigator	Signature
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Date

Shared Usage

Complete all the fields in this section if the usage of the equipment to be covered under the maintenance agreement/repair is shared by more than one project and/or with an Ohio State department(s). The cost of the maintenance agreement/repair must be determined by proportional use and cost.	
Requisition Number	
Cost of Use per Hour:	
Total cost of maintenance agreement/repair:	Total hours of usage during the maintenance/repair period:

Calculate the cost of use per hour by dividng the total cost of the maintenance	Total cost of maintenance =	/ hour
agreement/repair by the total hours used.	Total hours used	

Direct Allocable Cost

Provide the project number(s) and/or Workday worktag(s) and the corresponding hours of usage for each project or department contributing to the cost. Multiply the hours used by the cost of use per hour as calculated above to determine the allocable cost. Principal Investigators must sign beside each project being charged, with the understanding that the signature will serve as certification that all information given is accurate and true to the best of their knowledge.

Principal Investigator Signature	Sponsored Programs Project Number(s) or Workday Worktag(s)	Number of Hours	Cost of Use per Hour	Total Direct Allocable Cost
		×		=
		х		=
		×		=
		Х		=
		×		=
The sum of the total direct allocable costs m	ust equal the cost of the maintenance a	greement or repair.	То	tal

NOTE: If space is needed for additional projects or Workday worktag(s), please attach and send with this document.