LEASEHOLD IMPROVEMENT FORM

Date: _______________________

Campus: _______________________

Leasehold Improvement Contact Person: ____________________

Tag (Asset) number assigned to the improvement. ________________

(Assignment of the number will be done by the System Facilities Office and will be done in such a way to identify the item as a leasehold improvement. The records for the asset will be kept in the Facilities Office lease database.)

Description: _______________________________________________________

Current Lease Term:

Start Date ___________________ End Date ________________

What is the likelihood that the lease will be renewed? ___________________

Estimated Length of expected renewal(s)? ______________________________

Other Information: __________________________________________________

Send to System Accounting Department