

**Master Lease Program
 REQUEST FOR USE & APPROVAL**

REQUESTOR INFORMATION						
Request Date		Requesting Agency				
Program Name			Division/Bureau			
Agency Address			Contact (for this form) Name Phone Number Email Address			
Contact (Lease Schedule Origination/Signing of Lease Schedule) Name Phone Number Email Address			Contact (Repayment Information/STAR Coding) Name Phone Number Email Address			
Agency Level Approval (Signature Required)		Name and Title			Date	
ITEM INFORMATION						
Justification for Procuring the Financed Item/Undertaking the Project						
<input type="checkbox"/> Check if this is an IT Related Item, Service, or Project	Description of Financed Item (attach additional page(s) if needed)			General Purpose of Financed Item		
	New purchase or replacement?	Procurement Method	Proposed Vendor		Amount Paid Upfront (if any)	
Purchase Price						
Contingency (15% of Purchase Price)						
Total Funding Request (Purchase Price + Contingency)						
Proposed Delivery or Project Completion Date		Expected Useful Life of Asset (in years)		Basis for Determination of Useful Life		
Requested Repayment Term (in years)			Are Repayments part of base budget?			
Proposed Funding Source (GPR/PR/SEG)			Proposed Statutory Appropriation for Repayments			
STAR Coding						
FUND	GLBU	APPR	DEPT	OPER UNIT	PRODUCT	PROGRAM
ACCOUNT	PC BU	PROJECT	ACTIVITY	SOURCE	CATEGORY	SUB CAT
DOA Approvals				DOA Use Only – Special Conditions		
Master Lease Program			Date			
Division of Enterprise Technology (IT Related Item/Service/Project Only)			Date			
State Budget Office			Date			
DOA Secretary's Office			Date			