

Capital Expenditure Authorization (CEA) Form

Form Owner: Finance
Form Used By: Managers
Process Responsibility: Managers, Purchasing
Final Accountability: Finance

Date of Request:



Department:

CEA No.:

Type of Expenditure:

- Building & Improvement
- Machinery & Equipment
- Tooling
- Laboratory Equipment
- Furniture & Office Equipment
- Auto & Trucks
- Other:

Budget Status

Fiscal Year:

Budgeted Item No.:

Substitution Item No.:

No. of Asset Tags Needed:

If not budgeted, explain:

Description of item(s) to be purchased:

Purpose:

Total cost(s):

Cost justification:

Estimated life (in years):

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Cost Savings (if applicable)

	Present	Proposed
1. Each Unit cost (Material, Labor and Burden)	\$ <input type="text"/>	\$ <input type="text"/>
2. Number of units used per month	<input type="text"/>	<input type="text"/>
3. Cost of one month's usage (Line 1 x Line 2)	\$ 0	\$ 0
4. Total monthly projected savings (Present – Proposed)	N/A	\$ 1
5. Total cost to Implement Proposed Improvement (Includes tooling, prep, all initial costs)	N/A	\$ <input type="text"/>
6. Number of months to recover cost (Line 5 ÷ Line 4)	N/A	0
7. Estimated useful life of asset (in months)	N/A	<input type="text"/>
8. Number of months savings will be realized (after costs recovered - Line 7 – Line 6)	N/A	0
9. Total potential savings (Line 8 x Line 4)	N/A	\$ 0

Approvals

Requisitioner:

Signature:

Dept. Manager:

Signature:

General Manager:

Signature:

Additional Approvals (if applicable)

Treasurer:

Signature:

Vice President:

Signature:

Corporate:

Signature:

Additional Information

Related Documents

- [Capital Expenditure Justification Form](#)
- [Accounts Payable](#)