School Food Service Program

Large Equipment Request

E-Mail To: jacqueline.bricker@ag.state.nj.us

|  |
| --- |
| LEA Name or District: |
| **School/Site Name:** |
| **CN Agreement Number:** |
| **Food Service Director:** |
| **Fax Number:** |
| **Phone Number:** |
| **E-Mail:** |
| **Total Equipment Cost:** |
| **Date:** |

Submit one Request Form for each school requesting equipment. List any **large equipment** (in excess of $5,000.00), not listed on Form #286, needed to implement and operate the school food service programs.

**\*\*\* NJDA pre-approval must be obtained prior to purchase. \*\*\***

**REMINDER: Proper Federal/State procurement procedures must be followed which for purchases such as these include the requirement to obtain a minimum of three (3) or more price quotations to satisfy federal procurement requirements.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Equipment Requested:** | **Cost:** | **Quantity** | **Total Expense:** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**School Business Administrator Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NJDA Approval Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**