

CAPITAL RETURN REQUEST

Part 1

Initiate Capital Return (LAK Supervisor to complete)

Complete this section and press button #1 below

Date DD-MMM-YY

#1

Work Order Number

Requester (first name / last name)

Capital Project POET Number (for charge back)

Project Manager (first name / last name)

Items to be returned

Depot Location / Specificity

Partial / Damaged Materials

Assigned Storekeeper (first name / last name)

Comments

Please fill in required fields as per return request in SHAREPOINT

Part 2

Material Assessment (Assigned Storekeeper to complete)

Complete this section and press button #2 below

Date DD-MMM-YY

#2

Estimated Labour Hours

Estimated Value of Materials

Estimated Transport Cost

Transport Method

Comments

Part 3

Approval by Requestor

Complete this section and press button #3 below

Date DD-MMM-YY

#3

Approval Approved Not Approved

Edits / Changes if required

Part 4

Job Closure / Cost (Assigned Storekeeper to complete)

Complete this section and press button #4 below

Date DD-MMM-YY

#4

Actual Labour Hours

Actual Value of Materials

Actual Transport Cost

Actual Method

Comments:

Part 5

Process Return (LAK Supervisor to complete)

Complete this section and press button #5 below

Date DD-MMM-YY

#5

Cross Charges Complete Y/N YES NO

Comments: