

TOOLING AND EQUIPMENT APPROVAL FORM

Date:

Requestor Information		
First Name	Last Name	Position/Title
Email Address	Phone Number	Department

Tooling/Equipment Information		
Equipment Name	Model Number	Manufacturer
Estimated Cost	Delivery Lead Time	Installation Timeline
Purpose/Intended Use (Brief description of how tool/equipment will be utilized)		
Justification for Approval (Brief explanation of necessity for the manufacturing process including anticipated improvements in efficiency, safety, quality, or other relevant factors)		
Risk Analysis (Describe any potential risks and proposed mitigation strategies)		
Additional Comments		

Approval Details		
Approver Name	Title	Approval Status

Signature:

Signature Date: