

## INVENTORY CONTACT PERSON (ICP) APPOINTMENT FORM

This form is used to designate a Primary (and Alternate) Inventory Contact Person (ICP) for respective UTSA administrative departments, units, centers, etc. The form is completed ANNUALLY, prior to the start of a new fiscal year, and is also used to communicate MID-YEAR changes of ICPs.

The Inventory Contact Persons (ICP) are appointed annually by the Department Manager (Property Custodian). Their responsibilities include, but are not limited to: Property/equipment transfers, Removal of Equipment off-campus/forms, completing the Annual Physical Inventory, data entry for custodian/location changes for controlled/capital property, maintaining inventory paperwork, and assisting in equipment audits/reviews for their respective departments.

**Instructions: (This form must be TYPED)**

1. Complete and obtain the appropriate departmental signatures.
2. Email to the [inventory.department@utsa.edu](mailto:inventory.department@utsa.edu); use SUBJ: ICP Appointment and DeptID.
3. Ensure a copy of this appointment form is provided to the Primary and Alternate ICP to retain with departmental inventory records.
4. The Inventory Department Staff will CONTACT each ICP to schedule the required ICP Training.

Fiscal Year: _____
<b>DEPARTMENT DETAILS</b>
Name: _____
VP Area (i.e. VPAA, VPBA, VPSA, etc.): _____ Office Location: _____
Department IDs: _____
<b>PRIMARY ICP FOR THE DEPARTMENT</b>
Name: _____ Signature: _____ EmpID: _____
Title: _____ Email: _____ Office Location: _____ Ext: _____
Please check the box that applies to appointees training requirement: <input type="checkbox"/> New ICP Training (AM675) – Has never attended the mandatory AM 675 Inventory Training <input type="checkbox"/> Refresher ICP Training (AM676) – Has completed AM 675 Inventory Training
<b>ALTERNATE ICP (Highly Recommended)</b>
Name: _____ Signature: _____ EmpID: _____
Title: _____ Email: _____ Office Location: _____ Ext: _____
Please check the box that applies to appointees training requirement: <input type="checkbox"/> New ICP Training (AM675) – Has never attended the mandatory AM 675 Inventory Training <input type="checkbox"/> Refresher ICP Training (AM676) – Has completed AM 675 Inventory Training
<b>AUTHORIZED SIGNER FOR THE ANNUAL PHYSICAL INVENTORY CERTIFICATION</b>
Department Manager/Property Custodian
Name: _____ Signature: _____ Date: _____
Email: _____
Title: _____ Office Location: _____ Ext: _____