

RECORD OF EQUIPMENT ON LOAN

CSU-1079

WESTERN CONNECTICUT STATE UNIVERSITY

DATE _____ REPORT NO. _____
IS AUTHORIZED TO REMOVE FROM ROOM _____
OF THE _____ BUILDING _____
ADDRESS _____ BUILDING NO. _____

THE FOLLOWING EQUIPMENT:

| <u>TAG NO.</u> | <u>SERIAL NO.</u> | <u>DESCRIPTION/CONDITION</u> | <u>VALUE</u> |
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THE EQUIPMENT WILL BE USED FOR _____
WHICH IS RELATIVE TO WORK BEING DONE IN THE _____
AT THE _____ SPECIFIC UNIT(DEPARTMENT) _____
AGENCY NAME (WCSU) _____

THE EQUIPMENT WILL BE LOCATED AT _____
GIVE COMPLETE ADDRESS _____
UNTIL _____ ONE YEAR FROM DATE OF ISSUE _____
DATE OF RETURN _____

AT WHICH TIME IT WILL BE RETURNED TO UNIVERSITY COMPUTING OR IN CASE OF NON-IT EQUIPMENT TO ORIGINATING DEPARTMENT.

THE ABOVE NAMED INDIVIDUAL WILL BE RESPONSIBLE FOR LOSS DUE TO THEFT OR OTHER CAUSE AND ANY DAMAGE AND WILL PROVIDE DUE CARE AND SECURITY FOR THE ABOVE DESCRIBED EQUIPMENT UNTIL THE EQUIPMENT IS RETURNED TO THE AGENCY. IN THE EVENT OF A THEFT, A COPY OF A POLICE REPORT MUST ACCOMPANY THE NOTIFICATION TO INVENTORY CONTROL TO REMOVE AN ITEM FROM THE ASSET LISTING. THE RECIPIENT WILL BEAR RESPONSIBILITY FOR THE RETURN OF EQUIPMENT IN THE SAME CONDITION AS AT THE TIME OF RELEASE.

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| APPROVED DIRECTOR OR DEPARTMENT HEAD SIGNATURE | PRINTED NAME |
| RECIPIENT SIGNATURE | PRINTED NAME |

COMPLETE AND RETURN A COPY TO : ASSISTANT DIRECTOR OF PROPERTY MANAGEMENT & ONE COPY TO UNIVERSITY COMPUTING. RETAIN A COPY AND COMPLETE THE LOWER PORTION UPON RETURN OF THE EQUIPMENT.

DATE _____ THE ABOVE EQUIPMENT HAS BEEN RETURNED TO _____
IN THE SAME CONDITION AS, _____
BUILDING NO. AND ROOM _____

IT WAS ACCEPTED AT THE TIME OF THE LOAN, WHERE REASONABLE EXPECTED.

PLEASE NOTE ANY EXCEPTIONS:

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| DIRECTOR OR DEPARTMENT HEAD SIGNATURE | RECIPIENT SIGNATURE |
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A COPY OF THIS FORM MUST BE RETURNED TO PROPERTY MANAGEMENT: K. KOSCHEL OLD MAIN ROOM 014