



# EQUIPMENT LOAN AGREEMENT

Requester's Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

Phone # and Extension #: \_\_\_\_\_

## EQUIPMENT IDENTIFICATION ("EQUIPMENT")

(List separate items individually, even if they are components of an integrated system. Attach separate sheet if necessary.)

Description of Equipment, AVC ID # and/or serial # (Including Manufacturer and Model No.)	Agreed Value	Present location of Equipment (Bldg/Room No.)	Location where Equipment will be used (Bldg/Room No.)

<b>PERIOD OF LOAN ("TERM")</b>	<b>From:</b> _____ (Date Requester will take custody of loaned equipment)	<b>Through:</b> _____ (Date Requester will return loaned equipment to District)
	<b>PURPOSE OF LOAN</b> <input type="checkbox"/> Instruction <input type="checkbox"/> Research <input type="checkbox"/> Demonstration <input type="checkbox"/> Other (describe): _____	
<b>ADDITIONAL PROVISIONS (If any):</b> _____		

Requester agrees to abide by BP6500-Property Management, AP6535-Use of District Equipment and AP6530-District Vehicles (*ref. EDU §70902*) which can be found:

<https://www.avc.edu/administration/board/policyprocedures>

Requester will hold Antelope Valley Community College District harmless from all liability involved in the use of the above equipment. The equipment is to be returned in the same condition as received and the Requester further agree(s) to pay for any damage or loss incurred through negligence or lack of control for the same and agrees to pay for any corrective action taken to restore or replace the piece(s) of equipment to the original condition upon return. Requester also agrees s/he will not loan equipment to any person.

## REQUESTER APPROVAL (Send through Adobe Sign)

I understand and agree that the equipment identified above is on loan under the terms and conditions described herein.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Print name of Division Director

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Print name of Division Dean/  
Executive Director

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Division Vice President/President

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Send through Adobe Sign for signature and cc:

Warehouse if equipment has assigned AVC ID#

HR for personnel file