

## **Request for Off-Campus Use of University Owned Equipment**

A copy will be retained in your department and property management's files until equipment is returned to campus.

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### **Part I - To Be Completed By Requester**

Date: Requested By (Name/Department):

Reason for Request:

Duration of Use:

Off Campus Address Equipment Location:

Description of Item:

Manufacturer/Model:

Asset #/Barcode #: Serial #:

The equipment described above shall be used for legitimate university academic purposes only. The requesting individual hereby accepts full responsibility for the item(s) described above and, if irreparable damage or loss should occur, shall be liable to the extent of a reasonable replacement cost assessment to be determined by the university administration which shall be guided by the "original cost" and "cost of replacement." Individual liability shall remain in force until the permanent return of equipment to the campus.

Requester Signature

Department Head/Immediate Supervisor Signature

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### **Part II - To Be Completed By Property Management**

Is the equipment above the \$5,000 threshold? **Yes**      **No**      If yes, list asset #. If no, assign asset #:

Update location in RAM:

Asset tagged on: N/A

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### **Part III - For Return Only**

Return Date: Return Location (Building/Room #):

Return Condition: Return Verified By:

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### **Part IV - To Be Completed By Property Management**

Update location in RAM (if above \$5,000 threshold) Date processed:

Processed by:

Updated 5/9/25