

## **REQUEST TO BORROW SCHOOL OWNED EQUIPMENT**

**NOTE:** Equipment may only be borrowed by a person living in or attending the Davenport School District.

Please direct all questions to Joe Coppersmith, Director of Operations 725-5005

### **Top Section to Be Completed By the Individual Requesting Equipment**

EQUIPMENT REQUESTED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ACTIVITY FOR WHICH EQUIPMENT IS TO BE USED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BORROWER NAME: \_\_\_\_\_  
PRINT NAME SIGNATURE

ADDRESS: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Date Returned: \_\_\_\_\_

Borrower's signature indicates that he/she is aware that he/she is fully liable for any damage or loss which occurs to the equipment during the period of use and is responsible for the equipment's safe return. The borrower also hereby agrees to clean and restore equipment to the condition it was in at the time of the loan.

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### **TO BE COMPLETED BY THE FACILITY/MAINTENANCE DIRECTOR:**

\_\_\_\_\_ Approved \_\_\_\_\_ NOT Approved

SIGNATURE \_\_\_\_\_ Date Signed: \_\_\_\_\_

\_\_\_\_\_

**PLEASE NOTIFY THE OFFICE WHEN THE EQUIPMENT HAS BEEN RETURNED. Thank you!**