UHH EPSCoR ITER EQUIPMENT LOAN AGREEMENT

NAME: _____

ADDRESS: _____

TELEPHONE: ( ) _____ - _____

UH FACULTY ID: _____

EMAIL: _____

MAKE / MODEL / ITEM DESCRIPTION & SERIAL #:

High Intensity Source Probe "Mug Light"

- ☐ **Muglight**
- ☐ **Small white Reference**
- ☐ **Small Sample Holders**
- ☐ **Large White Reference Puck**

Turntable

- ☐ **Turntable**
- ☐ **Petri Small**
- ☐ **Petri Large**
- ☐ **Power Cord**
- ☐ **Bulb**

DATE BORROWED: ____/____/____

ANTICIPATED DATE OF RETURN: ____/____/____

I acknowledge I am a member of the **University of Hawaii faculty**.
I acknowledge receiving the **ASD Mug Light and Turntable**
I agree to return the **ASD Mug light and Turntable** that I borrowed by the date listed above.
In case of loss or damage to **any system parts**,
I agree to pay the amount of **$ 1600.000 to replace the ASD Mug Light.**
I agree to pay the amount of **$ 140.00 to replace the ASD Small White Reference.**
I agree to pay the amount of **$ 140.00 to replace the ASD Small Sample Holder.**
I agree to pay the amount of **$ 800.00 to replace the ASD Large White Reverence Puck.**
I agree to pay the amount of **$ 3800.00 to replace the ASD Turntable and Accessories.**
I agree to pay the amount of **$ 20.00 to replace the ASD Small Petri Dish.**
I agree to pay the amount of **$ 20.00 to replace the ASD Large Petri Dish.**
I agree to pay the amount of **$ 20.00 to replace the ASD Power Cord.**
I agree to pay the amount of **$ 20.00 to replace the ASD Bulb.**

PURPOSE FOR BORROWING: _____

BORROWER SIGNATURE: _____ DATE: ____/____/____

WITNESS NAME: _____

WITNESS SIGNATURE: _____ DATE: ____/____/____

This section will be filled out when you return the item.

BORROWER SIGNATURE: _____ DATE: ____/____/____

WITNESS SIGNATURE _____ DATE: ____/____/____

Created by: SDAL Staff, UH_Hilo
Last Modified: May 31, 2005

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