

# SUNY College at Brockport

## Property Loan Request Form – off campus use

Please print, complete, and submit to Payment & Procurement

Name of Borrower: \_\_\_\_\_

Campus Ext: \_\_\_\_\_

Signature of Borrower: \_\_\_\_\_

Department: \_\_\_\_\_

Location of equipment while off campus: \_\_\_\_\_

(Street Address, City, State, Zip)

Date of Property Removal: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Return: \_\_\_\_/\_\_\_\_/\_\_\_\_

Loan period may not exceed one (1) year

Reason for request: \_\_\_\_\_

### Property Description

Property Control Number	Item Description	Make	Model	Serial Number	Condition (Good, Fair, Poor)

### Department Approval

Department Chair Signature: \_\_\_\_\_

Dean/VP Signature: \_\_\_\_\_

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

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

### Returned Item Information

Property returned in good condition by: \_\_\_\_\_

Received by (Department Head): \_\_\_\_\_

Please retain a copy for your records and return this completed form to:

Procurement and Payment Services, Allen Building, Room 508

If you have any questions or concerns, please contact the Property Control Coordinator at ext. 5148