

## Equipment Custodian Form

- I understand that I may be assessed for the loss of or damage to the property assigned to me by the college.
- I understand that it is my responsibility to inform accounting office ([pslowi2@uic.edu](mailto:pslowi2@uic.edu)) via email if the location of the equipment changes. Additionally, I confirm that I have received a copy of the Equipment Loan for Employees and Students form. I agree to complete and submit the form to the Office of Administrative Services and receive approval before I remove the equipment from university property.
- I understand that while I am authorized to use this equipment for university business, the equipment remains the property of the University of Illinois.
- I will complete a police report with UIC Police if property is missing and I will send a PDF of the report for college accounting office.
- I agree to tag equipment immediately upon receipt of university property tag (P-Tag). Tags must be affixed to a permanent part of the equipment, where it receives the least damage and wear and is least likely to be concealed. The tag should be affixed where it can be seen easily and, whenever possible, on the lower right hand corner. If I fail to tag equipment in a timely manner, I understand that the college may reacquire the equipment.
- I understand that the equipment may only be used for university business and I understand that I am responsible for conveying the university property policies to all users.
- I will ensure safekeeping of the equipment and safe return of equipment to ETL.
- I agree to verify equipment location in a timely matter as a part of college annual inventory update and to respond to any correspondence in a timely manner.
- I understand that the Accounting Office staff will give me a signed copy of this form with a return date and confirmation number when I have returned this equipment.

### Equipment Information

Description of the Device: \_\_\_\_\_  
Model Name / Number: \_\_\_\_\_  
Serial Number/ P-Tag #: \_\_\_\_\_  
Accessories 1 (Monitor, printer): \_\_\_\_\_  
Accessories 2 (Monitor, printer): \_\_\_\_\_  
Accessories 3 (Monitor, printer): \_\_\_\_\_

### Custodian Information

Last Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Faculty Staff Other: \_\_\_\_\_  
College of Ed. Grant | Project: \_\_\_\_\_

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

Equipment Location Address: \_\_\_\_\_ Office #: \_\_\_\_\_

Off-Campus Location Address: \_\_\_\_\_

### Users Information (If different from Custodian)

User Last Name: \_\_\_\_\_  
User First Name: \_\_\_\_\_  
User Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

- **I affirm that I understand and agree to the college property accounting procedures explained above.**

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Custodian Signature

Date