Complete Streets Equipment Library Equipment Checkout Request Form



Instructions:

To request the use of equipment included in MORPC's Complete Streets Equipment Library, please complete this form and return it to the staff listed below.

Contact Information:	
Borrowing Agency:	
Representative Name:	
Representative Title:	
Phone Number:	
Email Address:	
Checkout Details:	
Toolkit Items Requested:	
Dates Borrowed:	
Start:	End:
Purpose for Borrowing Equipment:	
Conditions:	
☐ I understand that this equipment was purchased with funds from a grant from the Ohio Department of Health.	
☐ I will install the equipment in an inconspicuous location to minimize the probability of theft or vandalism.	
☐ I will inform my police department about the equipment to minimize concerns about unknown devices.	
☐ I will secure the equipment with, at a minimum, the locks, boxes and other security devices provided by MORPC.	
☐ I will provide MORPC with photographs and approximate coordinates of the specific location of each piece of equipment borrowed using the provided form.	
☐ I will return the equipment to MORPC by the "End" date specified above.	
☐ I understand that my agency may be required to replace any lost, stolen, or damaged equipment or parts thereof.	
Signature:	Date: