

A) Fixed Asset Information

Description

Serial no.

Model

Department

Room &
Building no.

B) Fixed Asset To Be Used By

Name

Phone

Date Borrowed

Expected
Return Date

Location of
Fixed Asset

I, _____, hereby acknowledge personal responsibility for safeguarding this asset while away from University of Toronto premises and returning it in satisfactory condition.

C) Authorized By

Name

Title

Signature(*)

* Principal, Dean, Division Head, Chair, Director of an institute or Centre, Head of administrative department with custody of the asset.

If the borrower is one of the above individuals, approval must be one level higher.

D) Return of Fixed Asset In Satisfactory Condition (to be completed by individual who originally authorized the loan)

Name

Title

Signature

Date
