

EMPLOYEE EQUIPMENT AGREEMENT

EMPLOYER INFORMATION

Employer: _____ Supervisor: _____

EMPLOYEE INFORMATION

Name: _____ Address: _____

Phone #: _____ Employee #: _____

Position/Title: _____

EQUIPMENT INFORMATION

Make: _____ Model: _____

Serial #: _____

Additional Info: _____

TERMS

By signing this form, I, the employee, acknowledge the equipment above is in working order and that I agree to the following terms:

- a) The equipment is to be used for company purposes only;
- b) If the equipment is damaged (excluding normal wear and tear), lost, or stolen outside of company premises or off company time I am responsible for any repair or replacement costs; and
- c) Upon separation from the company, I will return the equipment in good working order. If I fail to return the equipment upon separation from the company, or if it is damaged (excluding normal wear and tear), I authorize a payroll deduction to cover any replacements costs the company might incur.

Employee Signature: _____ Date: _____

Print Name: _____