

University of North Texas

Annual Equipment Liability Information Form

EQUIPMENT SERVICE TAG ID: _____

I HERBY ACKNOWLEDGE AND AGREE THAT:

1. I have received an electronic address to the UNT Policy for Asset Management; https://policy.unt.edu/sites/default/files/10.048_AssetManagement_2018.pdf
2. I have been briefed on the summary of responsibilities covered under this policy. **(4.3.2)**
3. I understand that I assume personal liability for damages, or loss, due to abuse and/or neglect of university property. **(4.3.2)**
4. This original acknowledgement will be placed in my department personnel file and will be maintained by my department.
5. If I am not a full-time employee, custody of this equipment will not be assigned to me. However, as the designated user of this equipment, all previously stated acknowledgements apply.

Employee Signature

Date

Employee Name (printed)

UNT EMPLID: _____

Employee's assigned office room number: _____

Designated Asset User Signature

Date

Designated Asset User Name (printed)

UNT EMPLID: _____