

# EQUIPMENT ENTRY FORM / OWNERSHIP AFFIDAVIT

Equipment Description

\_\_\_\_\_

\_\_\_\_\_

If oversize, give dimensions: \_\_\_\_\_ L x \_\_\_\_\_ W x \_\_\_\_\_ H x \_\_\_\_\_ lbs

Proposed Location

\_\_\_\_\_

\_\_\_\_\_

Are guests or members allowed to use it? If so, what steps must they take to be allowed?

\_\_\_\_\_

\_\_\_\_\_

### Safety Precautions

Eye Protection Required?	_____	Ear Protection Required?	_____
Buddy System Required?	_____	Respiratory Protection Required?	_____
Other Safety Precautions _____			

\_\_\_\_\_

\_\_\_\_\_

Purchase Date \_\_\_\_\_ Purchase Amount \_\_\_\_\_

The undersigned equipment owners (Owners) hereby affirm that they are the owners and the only owners of this equipment. The Owners understand that they may be asked to move or remove the equipment at any time, at sole expense of the Owners. The Owners agree that if the Board of Directors does not receive a response to a written or electronic request to move the equipment within 30 days, the property will be considered abandoned and may be discarded.

Owners also agree to the following conditions:

\_\_\_\_\_

\_\_\_\_\_

Owner Name	Contact	Ownership Amt (\$)	Signature	Date
_____	_____	_____	_____	_____

(Attach second page if necessary)

This form has been approved by the Board of Directors in the ( Regular / Special ) meeting of the Board held on \_\_\_\_\_.

Certified by the Secretary of the Board of Directors \_\_\_\_\_  
Signature Date