

# Equipment/Vehicle Use Form

Due to frequent demand of Levy County Property, the following form will be utilized to assist in maintaining accurate records for all equipment. Please contact the Extension Office Administration between the hours of 8:00 am and 4:30 pm, Monday through Friday, at 352-486-5131 to check availability of requested item prior to the date needed.

Any and all county owned equipment taken or assigned out to anyone must be signed for when leaving the premises and then signed back in and released of responsibility upon return. When signing out equipment, the purpose, nature and duration of event must be noted on the sign-out sheet or form. It goes without saying that personal use of equipment is prohibited. – Wilbur Dean, Levy County Coordinator.

Date Equipment Reserved: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Name of Person Responsible: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Equipment: \_\_\_\_\_

Equipment Used For: \_\_\_\_\_

If for an event, Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Educational Purpose of Event: \_\_\_\_\_

Snow Cone/Popcorn Equipment have a **\$15 NON-REFUNDABLE FEE. Make checks payable to: University of Florida**

Cash       Check Number: \_\_\_\_\_      Receipt Number: \_\_\_\_\_

Estimated Date of Return: \_\_\_\_\_ Signature of Person Responsible: \_\_\_\_\_

***In the event of any damage or breakage of equipment, the party and/or organization who has signed the above is responsible for the repair or the replacement of the equipment.***

### TWO DEEP POLICY

All volunteers and/or employees checking out vehicles/vessels that are transporting children **MUST** have **TWO approved LEVEL TWO, NON RELATED\* adult volunteers** present in the vehicle/vessel **AT ALL TIMES** during all transportation, programming, etc. regardless of number of youth. There are **NO EXCEPTIONS**.

\* Program coordinators will ensure that they always have two authorized level two enrolled individuals who are non-related present during any interactions with youth. Source: <http://florida4h.org/policies/#chap>

Please sign below stating you understand these terms and conditions and will follow procedure as it reads above:

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Print Name of 2<sup>nd</sup> Adult Volunteer \_\_\_\_\_

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Name of Employee Signing Out Equipment: \_\_\_\_\_

CED Signature for Approval: \_\_\_\_\_

Actual Date of Return: \_\_\_\_\_ Returned by: \_\_\_\_\_

Name of Employee Signing in Equipment: \_\_\_\_\_