

Terms and Conditions

By my signature as Requesting Individual, I agree to the following terms:

1. I agree that this equipment will be used only for official university purposes. This means that it will be used only for those teaching, research, service, and administration components of my responsibility as a UWM employee.
2. I agree to immediately terminate insurance coverage through written correspondence or through e-mail when this equipment is returned to campus if the coverage date listed does not have an ending date.
3. I agree to cooperate with UW-Milwaukee or UW-System officials regarding any audits that may be taking place while this equipment is off campus, which may include returning the equipment to campus on very short notice for audit purposes.
4. If this is a computer, I agree to all software licensing agreements for software that is installed on the computer.
5. I agree to take appropriate measures to provide for the security and protection of this equipment.

Capital Transfer Form

Date of Transfer: _____ Date: ____/____/____

UWM Inventory Decal Number: **M** _____

Serial Number: _____

Equipment Description: _____

	Transfer From	Transfer To
Responsible Party and Social Security Number:		
UDDS#:		
Location: Building		
Room Number		

APPROVALS (signatures)

Transferring responsible party: _____ Date: ____/____/____

Receiving responsible party: _____ Date: ____/____/____

Business Office (transferring): _____ Date: ____/____/____

Send completed form to the Business Office, Enderis 571