## **New Equipment**

## **SECTION 1 – USER DETAILS**

(Completed by Andrew – room 264)

Name				
Email address				
Telephone				
Room/Desk Number				
Type of user (PG/Staff/Visitor etc	2)			
Supervisor/Staff Position				
SECTION 2 – EQUIPME (Completed by Andrew)	NT			
Equipment Type		Estimat	ted order date	
			ted delivery date to user	
Where to be used		Notes	ted derivery date to discr	
		11000		
Insurance cover details				
details				
SECTION 3 – USER AGE  I hereby agree to use this equipm at all times. Any damage caused equipment (eg personal phone call the second	ent solely for the purposes r by careless attention or mis- lls on College provided mob	use will be my bile phones) is	y responsibility. Personal t forbidden.	use of the
Signed (user):		Signed (supp	igned (support):	
ate: Date			e:	
Date.		Date.		
To be filled in by IT suppo	ort staff			
Username				
Serial/Equipment No				
Dellar Equipment 110				

Completed form to be returned to Matt Hilling (284).