

**REQUEST FOR OFF PREMISES USE OF DISTRICT PROPERTY
(NOT TO BE USED FOR PERSONAL GAIN)**

NAME _____ REQUEST DATE _____

ADDRESS _____ TELEPHONE # _____

BUILDING _____

CHECK OUT DATA

DATE REMOVED FROM PREMISES _____ RETURN DATE _____

ITEM _____ TAG# _____ MAKE _____

MODEL _____ SERIAL # _____

DESCRIPTION _____ CONDITION _____

APPROXIMATE VALUE _____

NAME OF HOME OWNER OR OTHER INSURANCE COMPANY _____

REASON FOR OFF PREMISES USE _____

Borrower's Signature *Date*

Adm./Supv. Signature *Date*

Copy: Treasurer's office

CHECK IN DATA

ITEM RETURNED DATE _____

The above property has been returned to the Forest Hills School District in the same condition as above.

Adm./Supv. Signature *Date* *Borrower's Signature* *Date*

Copy: Treasurer's office