



ADVANCED RESOURCE SOLUTIONS

INNOVATIVE SOLUTIONS FOR PROJECT SUCCESS

CLIENT NAME: _____

PERSONAL			
Last Name	First	Initial	Social Security #

TOOL LOANER LIST			
Tool Description	Approximate Replacement Cost	Checkout date/ Signature Employee and Supervisor	Check IN date/ Signature Employee and Supervisor

GENERAL INFORMATION

Yes No

I have the basic set of hand tools required from the tool list provided by _____.

If NOT, which tools are missing?:

CERTIFICATION & AUTHORIZATION

By signing this form, I acknowledge that any tool that I borrow shall be returned. Otherwise, I will be subject to a payroll deduction for the replacement cost of said tool or I must replace said lost tool. When a tool is checked out, the borrower shall be responsible for the tool. Accidental damage shall NOT be the responsibility of the borrower, however, the broken or damaged tool must be returned for credit.

I hereby acknowledge that I have read and agree to the above statements.

Signature

Date