



## Device Loan Agreement

Borrower: \_\_\_\_\_ Email: \_\_\_\_\_

Organization: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Ward/Zip \_\_\_\_\_

Driver's License#: \_\_\_\_\_ User (if not Borrower): \_\_\_\_\_

### Type of Borrowers (use ✓)

|                                   |  |                          |  |
|-----------------------------------|--|--------------------------|--|
| 1. Individual w/Disability        |  | 5. Health/Rehabilitation |  |
| 2. Family/Guardian/Authorized Rep |  | 6. Community Living      |  |
| 3. Educational Organization       |  | 7. Technology Rep        |  |
| 4. Employer/Business              |  | 8. Others                |  |

### Purpose of Device Loan (use ✓)

|  |  |
|--|--|
| A. Assist in decision making (device trial or evaluation)        |  |
| B. Service as loaner during device repair or waiting for funding |  |
| C. Provide an accommodation on a short-term basis                |  |
| D. Other   |  |

### Loaned items

| Item Description | Inventory# | Dev. Class |
|------------------|------------|------------|
|                  |            |            |
|                  |            |            |
|                  |            |            |
|                  |            |            |
|                  |            |            |
|                  |            |            |
|                  |            |            |
|                  |            |            |

#### Device Classifications

1. Vision
2. Hearing
3. Speech Communications
4. Learning, Cognitive, Developmental
5. Mobility, Seating & Positioning
6. Daily Living
7. Environmental Adaptations
8. Vehicle Modifications, Transportation
9. Computers & Related
10. Recreation, Sports & Leisure
11. Other

**Loan Date:** \_\_\_\_\_ **Due Date:** \_\_\_\_\_ **Returned Date:** \_\_\_\_\_

I understand this equipment is for use only by the individual specified above unless otherwise noted and is to be returned to ATPDC on or before the Due Date. I understand that I am responsible for any repairs or replacement costs incurred due to abuse, negligence, loss or theft of this equipment during the lending period. I have read and understand these terms.

**Borrower's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Assistive Technology Program for the District of Columbia**  
**Device Loan Policies**  
(Updated 01/11/18)

**Please read the following and sign below. The person who is responsible for this loan must sign this form.**

**The purpose of the ATPDC device loan program** is to provide a device on a short-term basis to assist individuals with disabilities in decision making, to provide an accommodation on a short-term basis, to serve as a loaner while awaiting device repair or funding, for self-education or training or other purposes as described.

**The loan period** is 2-4 weeks unless prior arrangements have been made with the ATPDC Resource Center and if no one is waiting for the equipment.

**Software and apps** are available only through the borrowing of a laptop/tablet with the software/app installed. Availability of laptops and tablets is limited.

**Borrowers Responsibilities:**

- Borrowers are responsible for picking up and returning all loaned equipment on or before the due date to the District of Columbia Assistive Technology Resource Center located at 220 I Street, Suite 120 N.E., Washington DC 20002.
- In case of damage of equipment or missing components, borrowers are held responsible for repair or replacement of equipment.
- In the case of theft, borrowers must immediately report the incident to the police and provide a copy of the police report to Assistive Technology Program. Under these circumstances, the borrower will not be held responsible.
- Failure to comply with these responsibilities will result in the loss of future access to the Device Loan Program, in addition to applicable financial liability.
- Borrowers DO NOT have permission to trade, sell or upgrade any loaned equipment. In addition, it is illegal to copy or distribute any software or app.

**Borrower's (Responsible Party) Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_