# EQUIPMENT LIABILITY AGREEMENT

**LOAN PERIOD:** 1 week for laptops, 2 weeks for Chromebooks, 3 days for all other equipment.

**LATE FEES:** A $15 late fee will be assessed if the equipment is not returned on time. If the equipment is two or more days late a fee will be assessed that is equal to the replacement cost or $30, whichever is higher.

**FINES:** Note that you will be charged for the replacement cost of the equipment if the equipment is returned late. You will be charged for the replacement cost of the equipment if the equipment is returned in damaged condition. Replacement cost will not exceed $2,000.00.

**NOTIFICATIONS:** You will be notified by email before your account is late. This is the ONLY notice that you will receive. Fines and penalties accrue whether or not you have received notice. YOU are responsible for returning the equipment on time and in good condition.

**LOAN CONDITIONS:**
- Laptops and other equipment are available on a first-come, first-served basis. You cannot reserve equipment.
- You will need your IC ID card to check out any equipment. NO EXCEPTIONS.
- Equipment loans are not renewable.
- If the equipment is lost, stolen, or misplaced, you are still responsible for the replacement cost.
- Schewe Library cannot offer technical support for equipment.
- You MUST return the equipment to a Schewe Library staff person or library student worker. Do NOT return the laptop in the book drop, as the laptop will almost certainly be damaged, and YOU WILL be responsible for the replacement cost.

By signing the form below you agree to ALL of these conditions.

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## Student Equipment Liability Agreement

By signing this form I agree to abide by all college policies specifically those relating to computer usage. I understand that while the equipment listed is in my possession I am liable for any hardware or software damage incurred as well as applicable fees and fines. I understand my Illinois College student account will be charged for any fees or fines.

Name (print): ___________________________  Name (signature): ___________________________

Phone: ___________________________  IC E-mail: ___________________________  ID: ___________________________

Equipment number: ___________________________  Date checked OUT: _______________  Date checked IN: _______________

**ATTENTION:** A $15 late fee will be assessed if the equipment is not returned on time. If the equipment is two or more days late a fee will be assessed that is equal to the replacement cost or $30, whichever is HIGHER.