



Home Use/Remote Location

University-Owned Assets Only

- Home Use
- Remote Location

Name: _____ Title: _____
(Please print)

Department Name: _____ ORG Number: _____

Intramural Address: _____ Mail Code: _____

E-mail address: _____@_____

Telephone: (Office) _____ - _____ - _____ (Home) _____ - _____ - _____

Home/Remote Address: (where asset will be located)

Street: _____ City: _____ State: _____ Zip: _____

*Please complete the following for University-owned assets to be used at home.
(Attach a separate sheet if necessary.)*

Asset # or Tag#	
Description	
Acquisition Date	
Model #	
Serial #	
Accessories	

- Organization Does agree to assume the \$500 deductible liability
- Organization Does not agree to assume the \$500 deductible liability

_____ Date: _____

Department Chair, Director or Senior Business Administrator Signature

Responsibility for Liability

I understand the policy concerning the use of University-Owned equipment at home and agree to assume the \$500 deductible liability if my organization or center does not assume the liability.

Employee Signature: _____ Date: _____

Is asset being returned to Penn from Home/Remote location? Please complete below:			
New Location:			
Return Date: _____	Building: _____	Floor: _____	Room: _____
Asset Administrator Signature _____		Date: _____	

**DEPARTMENT MUST RETAIN FORM IN ACCORDANCE WITH THE
UNIVERSITY'S RECORD RETENTION POLICY**