



Northeastern Illinois Public Safety Training Academy

Equipment Loan Request

Organization:	Date Loaned:	Date to be Returned:
Contact Name:	Contact Phone:	
Program Category:	Contact Email:	

Equipment Requested

Amount	Item	Inventory number

Description of Use

Please describe the intended use of item(s) to be loaned

Pre-inspection

Please note any damage to item(s) prior to taking items

Submitted By

Print Name:	Signature:	Date:
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Received By

Signature:	Date:
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Approved By

Signature:	Date:
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Northeastern Illinois Public Safety Training Academy

Equipment Return Form

Return Inspection

Please describe any damage or repair needed to items loaned

NIPSTA Repair Request Filled out

Returned By

Print Name:	Signature:	Date:
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-----Below to be filled out by NIPSTA Staff-----

Received By

Signature:	Date:
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Inspected By

Signature:	Date:
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NIPSTA Inspection

Describe any damage or repair needed to item(s) returned

Repair/Service Costs

Amount	Parts/Labor	Unit	Cost
Total Cost			