

EQUIPMENT LOAN AGREEMENT

This agreement is made between(name of patient)

Of(address)

And Library House surgery, Avondale Road, Chorley, PR7 2AD or the loan of the equipment listed below:-

Box/BP Machine Number	Date of Issue	Period of loan
Deposit £10.00	Date Return Due	Date Returned/Deposit Refunded

TERMS AND CONDITIONS

- The equipment is supplied for the maximum period, details above, and is due to be returned on or before the date specified. The equipment is to be used only for the specific use of the patient named above. A £10 deposit is required to loan this equipment.
- The Practice will keep the equipment in good condition and repair and will test that it is fully working and in good order prior to issue. The patient, in accepting the equipment, warrants that they have home or personal insurance in force to cover loss or damage (including accidental damage) to the equipment both in the home and elsewhere whilst under their control, on a “new for old” basis.
- The patient agrees that in the event of such loss or damage arising they will immediately inform the Practice, and they will make a claim on their policy and forward all proceeds of the claim to the Practice for an agreed sum.
- The patient agrees that where there is a shortfall between the value of the settled claim and the cost of a direct or comparable replacement item, the cost of the shortfall becomes their responsibility and will reimburse the Practice accordingly.
- Where the equipment is not returned by the date above the Practice will contact the patient and ask them to return the equipment immediately. Where this does not occur, the Practice reserves the right to take legal action to recover the equipment or equivalent cost of the equipment.
- The patient will not modify the equipment or attempt to open the equipment or use it in any way inconsistent with its purpose. **Do not change the batteries** – return the machine to the Surgery.
- The patient is responsible for the return of the equipment by the due date without reminder and **must ensure they return the copy of this agreement and get a receptionist to sign it to confirm the equipment has been returned to the practice.** This remains the patient’s responsibility. Non return of equipment will result in loss of your deposit.
- The term may be extended only by the written agreement of the Practice in the form of a new agreement form covering the extended period.

EQUIPMENT LOAN AGREEMENT

Signed and agreed:(Patient)

Print Patient Name/Emis No:

Date of loan/...../.....

Deposit of £10 taken(Staff member)

Date:/...../.....

Return of Equipment

Date of return:/...../.....

Received by(Staff member)

Deposit Refunded(Staff Member)

Machine cleaned by reception(Staff Member)