



# THE COLONY CARES

## Tool Lending Program



**The undersigned participant(s) hereby certify the following:**

1. I am over the age of 18 and will be using the equipment from the Tool Lending Program.
2. I understand that some of the items for loan may be dangerous if used by persons under the age of 18; I will restrict use of the power equipment used only to those 18 years of age and older.
3. I have received and understand the written or verbal instructions on the proper operation and maintenance of the power-operated items.
4. I will operate all items as instructed by the manufacturer's safety guidelines and in conformance with all written and oral instructions received.
5. I will return any borrowed items clean and in working order.
6. I understand that I will be responsible to pay for the replacement of any items not returned or pay for the repair of any item not returned in the condition in which they were received (normal wear and tear excluded).
7. I will not use any loaned items outside of The Colony city limits.
8. I will not use any loaned item for any commercial purposes.
9. I agree that I will wear personal protective equipment (i.e. hearing, eye protection) while operating all loaned equipment.
10. I agree to refill fuel cans and additives (weed eater mix) if needed before returning them.
11. I understand the maximum amount of time equipment is loaned out for is 48 hours, except when a holiday falls on date of return, then the equipment must be returned on the next working day following that holiday.
12. I understand that the use of this equipment may be dangerous and can result in injury or death. I agree to defend, indemnify, hold harmless and release The City of The Colony and any of its departments, agencies, officers or employees from all damages, claims, liabilities and expenses, including attorney's fees and legal costs, arising or resulting in any way from delivery, placement, presence or servicing of the tool lending program and the equipment provided.
13. Coordinator Only, if group. I will ensure that the equipment is secured when not being used and that all items will be returned by \_\_\_\_\_ am/pm on \_\_\_\_\_

Organization Name (If applicable): \_\_\_\_\_

Participant Name (please print): \_\_\_\_\_

Participant Address: \_\_\_\_\_

Participant Driver's License/ID Number & State: \_\_\_\_\_

Participant Cell Phone: \_\_\_\_\_