



MEMORANDUM

TO: Director of Procurement Services
FROM: (Name of individual making request)
DATE: (Date this form is completed)
SUBJECT: Approval to Evaluate Capital Equipment
Requesting Department: (Full name of department requesting the equipment evaluation)
Contact Person: (Person who can answer questions regarding equipment) Ext:

University of Memphis requires the approval of the Procurement Services director prior to accepting any equipment for evaluation. The equipment described herein is requested for evaluation subject to the following conditions:

PROVIDE DESCRIPTION OF EQUIPMENT (complete description):

MANUFACTURER AND/OR DEALER:

Dates of Evaluation:

Delivery Date: (must be after this request has received approval)

Removal Date: (should be no more than thirty days after delivery date)

HOLD HARMLESS:

Vendor will indemnify, save harmless, and defend the University of Memphis (including the Board of Visitors and employees) against any and all liability, claims, and costs of whatsoever kind and nature for injury to or death of any person or persons and for loss or damage to any property occurring in connection with or in any way incident to or arising out of the occupancy, use, service, operations, or performance of work in connection with this agreement, resulting in whole or part from negligent acts or omissions of its employees, agents, or representatives. Through signature of their agent, the vendor agrees this equipment is placed without obligation to the University of Memphis and the receipt of these materials in no way represents an endorsement or commitment to purchases. Vendor shall obtain and maintain for the term of this evaluation, casualty property damage insurance against risk of loss or damage to the equipment.

VENDOR NAME DATE

VENDOR REPRESENTATIVE'S (AGENT) SIGNATURE DATE

DIRECTOR OF PROCUREMENT SERVICES DATE

PROCUREMENT SPECIALIST DATE