

In-Person Sales – Equipment Contract
Complete and Return At Least Ten (10) Business Days Prior to Your Event

Org. Number: _____ Org. Name: _____

Event Name: _____

Event Date: _____ Equipment Return Date: _____

Two members of your organization must be designated as the users of this equipment for this event. We require the Net IDs and corresponding UConn email addresses of those members:

User #1: Net ID: _____ Email: _____

User #2: Net ID: _____ Email: _____

Equipment Return:

- Return to SABS at the end of your event.
- If your event ends after 4:30pm, return before noon on the next business day.
- If you cannot return it on time, contact SABS at 860-486-3163 or dsabusinessservices@uconn.edu.
- **Your bank account will be restricted until the equipment is returned.**
- **Funds collected at your event will not be deposited into your bank account until the equipment is returned.**

Agreement:

We understand any funds collected during this event will not be credited to our organization's bank account until the equipment is returned. A \$500 security deposit for the use of an iPad and credit card swipe device is required. These funds will be unavailable for use until the equipment is returned undamaged. If, upon return, either device is damaged or needs repair, the security deposit is forfeited.

Security Deposit Disbursement Request: [Access Here!](#)

- Payee – University of Connecticut
- Amount – \$500.00
- Expense Code – 623
- Description (What, Where, When):
 - Equipment Rental, In-Person Sales Event, *Date(s) of the Event*

Organization Approval:

The following authorized representatives of the organization have read and agreed to the contract above. The organization agrees to the consequences identified if the contract is breached.

Treasurer: _____ Date: _____

President: _____ Date: _____