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| This form is for the transfer of ownership of equipment items **from** the Equipment Program to either another funding program or an individual client. It outlines the terms and conditions that must be agreed to for this to occur.  To be completed, signed and returned to DHS Equipment Program at: [DHSEquipmentProgram@sa.gov.au](mailto:DHSEquipmentProgram@sa.gov.au) | | | | |
| **Client Name** | | | **ESIS Client Number** | |
| Equipment item(s) to be transferred: | | | | |
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| Ownership of the above equipment item(s), on loan to this client, will transfer from the Equipment Program to the following: | | | | |
| Client: | Program/Agency - Name: | | | |
| **Agreement** | | | | |
| Following transfer of ownership on this date, the Equipment Program will no longer be responsible for: | | | | |
| * maintenance, repairs and replacement of the equipment item(s) | | | | |
| * reviewing the client’s use of the equipment item(s); | | | | |
| * any claim, loss, damage or expense, including for death or injury, property damage or financial or other consequential loss, in conjunction with use of the equipment item(s) | | | | |
| **I agree that the ownership of the equipment items listed above will be transferred from the Equipment Program, as per the terms outlined above.** | | | | |
| Client Signature: | | | | Date: |
| Program Delegate Name: | | Program Delegate Signature | | Date: |