

(To be put on RO letterhead)

Terms of Acceptance

I, _____, agree to accept the below described donated equipment and have examined the equipment and agree to accept it in “as is condition”. I understand that by accepting the equipment described below I agree to accept the responsibility for all up keep, repairs and liability to said equipment, including any physical adjustments that need to be made for personal use. I also understand that once I accept the described equipment the Department of Mental Health, Division of Developmental Disabilities _____ Regional Office and their agents are free and released from any liability pertaining to this equipment.

I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Department of Mental Health, Division of Development Disabilities, _____ Regional Office, or any other person connected to this program, their agents, representatives and assigns for any and all injuries to or illness suffered by myself or any other person(s) resulting from the used of said equipment.

Description of equipment being accepted: _____

Your signature on this document verifies you have read and agree to the terms above.

Recipient’s signature

Date

Regional Office Representative

Date

Individual’s / Consumer’s name

cc: RO
Individual/Family
Consumer File