

# TOOL LENDING CENTER

## EQUIPMENT RENTAL PACKET

*“We Have the Right Tool for the Job!”*

### Packet Essentials

- Equipment Check-out Form
- Lending Agreement
- Tool Lending Rules Acknowledgement Form



Edger



Hedger  
(17" & 24")



Lawn Mower  
(Gas / Electric)



Seed Spreader  
(wheels & handheld)



Submersible  
Pump



Weed Eater



Post  
hole digger

**Reserve a tool today!**

**TOOL RENTALS**

*By Appointments  
Only*



**City of Peoria**  
NEIGHBORHOOD & HUMAN SERVICES

Contact Community Engagement to reserve a tool today at  
623-773-7667 or email [communityengagement@peoriaaz.gov](mailto:communityengagement@peoriaaz.gov)

# TOOL LENDING CENTER

## Neighborhood and Human Services Department

**\*\*YOU MUST BE AT LEAST 18 YEARS OF AGE TO OPERATE POWER EQUIPMENT\*\***

TOOL	NUMBER CHECKED OUT & IN	TOOL	NUMBER CHECKED OUT & IN
Axe	_____	Pick	_____
Blower/Vac**	_____	Pitchfork	_____
Edger**	_____	Post Hole Digger	_____
Extension Cord	_____	Push Broom	_____
Gas Can	_____	Rakes	
Hedger**		Arizona	_____
17"	_____	Leaf	_____
24"	_____	Rock	_____
Hoe	_____	Garden	_____
Lawn Mower**		Seed Spreader	
Gas	_____	W/Wheels	_____
Electric	_____	Handheld	_____
Loppers		Shop Vacuum	_____
Small	_____	Shovels	
Medium	_____	Square	_____
Large	_____	Round	_____
Goggles	Maximum 2 Pair _____	Sledgehammer	_____
Masks	Maximum 2 _____	Sprayer	_____
		Submersible Pump	_____
		Weed Eater**	_____
		Wheel Barrow	_____

\_\_\_\_\_  
PRINT full name of person checking out tool(s)

\_\_\_\_\_  
**Date tool(s) checked out**

\_\_\_\_\_  
Address of person checking out tool(s)

\_\_\_\_\_  
**Date tool(s) are to be returned**

\_\_\_\_\_  
Phone number of person checking out tool(s)

\_\_\_\_\_  
**Date tool(s) returned**

\_\_\_\_\_  
Signature of person CHECKING OUT tool(s)

\_\_\_\_\_  
Signature of person RETURNING tool(s)

\_\_\_\_\_  
Name of Neighborhood Association (if applicable)

\_\_\_\_\_  
City of Peoria staff signature

**--ALL ITEMS MUST BE RETURNED CLEAN--**

**PICK UP AND RETURN IS BY APPOINTMENT ONLY MONDAY-THURSDAY. YOU MUST CALL  
623-773-7667 BETWEEN THE HOURS OF 7:00 AM AND 6:00 PM TO SCHEDULE AN APPOINTMENT.**

[Colleen.liff@peoriaaz.gov](mailto:Colleen.liff@peoriaaz.gov)



# Tool Lending Center

Office  
use only

## Borrower's Agreement – *Please Print Legibly!*

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone – Home

\_\_\_\_\_  
Phone – Work

\_\_\_\_\_  
Phone – Cell

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Driver's License #

\_\_\_\_\_  
Address Verification (Initial)

**City of Peoria Tool Lending Center  
Waiver and Indemnification**

I, \_\_\_\_\_ (print name), state that I am capable and experienced in using the tools I am borrowing, and that I will use the tools I am borrowing in a safe and proper manner.

I, do hereby for myself, on behalf of my successors and assigns, in consideration of being permitted to borrow tools, waive any and all claims against the City of Peoria for any injury or injuries of any nature that I may suffer or incur in the use of the tools that I am borrowing from the City of Peoria Tool Lending Center. I do, hereby for myself, on behalf of my successors and assigns, in consideration of being permitted to borrow tools, agree to release and indemnify and hold harmless the City of Peoria, its officers, agents, and employees from any and all liability, loss, claims, and demands, actions or causes of action for the death or injury to any persons and for any property damage suffered or incurred by any person which arises or may arise or be occasioned in any way from the use of tools I am borrowing from the City of Peoria Tool Lending Center.

I affirm that the above information is current, true and correct and may be subject to verification. I further state that I have read and fully understand the rules and regulation of the City of Peoria Tool Lending Center and I understand that failure to comply with any of these rules may result in revocation of my borrowing privileges and/or legal action against me. I have read and signed a Waiver and Indemnification form, relinquishing any and all claims against the City of Peoria.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Agreement

\_\_\_\_\_

Witness for City of Peoria