



Board of Lucas County Commissioners
Department of Human Resources

Hybrid Work Equipment Inventory Form

Name: _____ Department: _____

Work Email: Work Phone: Mobile Phone:

Please identify any computer equipment issued to you by your Department for use during remote work. If the equipment is marked with an ID tag, be sure to include that information. Serial or Model Number is required.

The employee is responsible for any loss or damage of equipment caused by intentional acts or negligence on the part of the employee or their family and is responsible for paying the repair cost or replacement value of equipment lost or damaged resulting from intentional acts or negligence as stated above.

If the worker ceases to be employed by the Board of Lucas County Commissioners, transfers to a different agency or department, cancels their hybrid work agreement, or has their agreement cancelled by their manager or supervisor, all equipment issued for use for hybrid work must be returned. It is the responsibility of the manager, supervisor, or a designated person within the agency or department to ensure the equipment is returned and is in suitable condition.

Employee Name

Supervisor Name

Employee Signature and Date

Supervisor Signature and Date