

City of Burien, Washington Contract Routing Sheet

Name of Contracting Party: Washington State Dept. of Labor & Industries (L&I)

Project Name/Description: **Borrower Agreement Form for Safety and Health Video Library**

Contract Amount: \$ N/A
 (Include Contractor's Proposal Amount and Sales Tax)

Type of Contract:

<input type="checkbox"/> Architectural/Engineering <input type="checkbox"/> From Engineering Roster <input type="checkbox"/> Advertised Bidding Done <input type="checkbox"/> Professional Services (Non-Engineering) <input type="checkbox"/> 3 Bids received <input type="checkbox"/> Direct Negotiation	<input type="checkbox"/> Construction <input type="checkbox"/> Informal Bidding Process Done-3 bids (less than \$20,000/\$35,000) <input type="checkbox"/> From Small Works Roster (\$20,000/35,000 to \$100,000) <input type="checkbox"/> Competitive/Advertised Bidding Done (Over \$100,000) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Human Services/Arts & Culture/City Match <input type="checkbox"/> Other: _____ <input type="checkbox"/> Contract Amendment to Contract No. _____
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(Please attach a list of all bids received)

Is this contract authorized in the current year's budget? Yes No

If budgeted, list Fund/Dept.: _____

Page # in Budget: _____ Budget line item amount: \$ _____

BARS Account Number: N/A

Is a budget amendment needed? Yes No Amount? \$ _____

Date of Council Approval: _____

REVIEWED BY:

Contract Manager: ~~Cindy Schaff~~ Angie Chauffy Date: _____

Department Director: _____ Date: _____

Management Analyst: _____ Date: _____

<p style="text-align: center;"><u>Routing Instructions:</u></p> <input type="checkbox"/> Send original to Contractor for their signature and then provide a copy of the fully signed contract to _____ <input type="checkbox"/> Contract is already signed by Contractor, please provide a copy of the fully signed contract to: _____ <input type="checkbox"/> Other (Please describe) _____	<p style="text-align: center;"><u>Contract File Checklist:</u></p> <input checked="" type="checkbox"/> Purchase Order # _____ <input checked="" type="checkbox"/> Tax ID Form <input checked="" type="checkbox"/> Current Business License # _____ <input checked="" type="checkbox"/> Insurance Certificate <input checked="" type="checkbox"/> Contract Fully Signed
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BORROWER AGREEMENT FORM

Safety & Health Video Library & Resource Center

Http: //www.videos.lni.wa.gov

Dept of Labor & Industries, PO Box 44607, Olympia, WA 98504-4607

To open an account and borrow videos, please fill out this form and FAX to: 360-902-5675

Name <p style="text-align: center;">Angela Chaufy</p>		Delivery Type <input type="checkbox"/> Pick Up (Thurston County) <input checked="" type="checkbox"/> Ship	
Business Name <p style="text-align: center;">City of Burien</p>		Type of Business Government – City/County	
Physical Street Address <i>(must be a Washington address)</i> 400 SW 152nd St., Ste. 300		City Burien	State WA
Mailing Address <i>(if different)</i>		City	State WA
Format Preference <input type="checkbox"/> DVD only <input type="checkbox"/> VHS only Both, preference is <input type="checkbox"/> VHS <input type="checkbox"/> DVD <input checked="" type="checkbox"/> No Preference			
Email address angiec@burienwa.gov		Phone (206) 248-5504	Fax (206) 248-5539
Language Preference <input checked="" type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Both			

TERMS AND CONDITIONS:

1. Copyrighted materials are loaned subject to the condition that **any form of duplication is strictly prohibited** in accordance with Title 17 of the United States Code of Federal Regulations. Unauthorized duplication of copyrighted materials will result in immediate cancellation of borrowing privileges.
2. **Materials are loaned for a period of one week.** When videos are borrowed, the shipping label has the return date printed on it. This is the date the videos must leave your office. Three late returns will result in cancellation of borrowing privileges. Accounts may be suspended at any time for inappropriate use of resources.
3. **Borrower accounts are established by individuals.** There is no limit to accounts per business. However, a borrower may not loan materials to any person. Example of prohibited loans: consultant to client; corporate office to corporate office.
4. **The borrower is financially responsible for any loss or damage** of library materials and agrees to reimburse the library for full recovery costs for any items lost or damaged. This may include the cost of videos, CDs, DVDs, printed materials, shipping cases, and collection costs.
5. **The borrower is responsible for the cost of return shipping.** Unless programs are hand-delivered by the borrower, return shipping must be through a **TRACEABLE SHIPPING SERVICE** e.g. *United Parcel Service, Federal Express or Registered Mail with insurance.* Return by untraceable means will result in borrower liability in the event of loss and late return. Returning videos to an L & I Field Office or other facility is prohibited.
6. Accounts must be designated as Pick Up Only or Ship Only. Thurston County users are required to pick up and return materials to the L&I Service Location lobby in Tumwater.
7. I understand that costs due for lost or damaged items will be turned over to collections.

IMPORTANT: Read before signing

I have read and understand the terms and conditions listed on next page. As a condition of my participation in the Washington State Department of Labor & Industries, Safety and Health Video Library, I agree to comply with them. I have kept a copy of this agreement for my records. I certify that I am a Washington Resident.	
Date 11/7/11	Signature <i>Angela M. Chaufy</i>