

EQUIPMENT REQUISITION FORM

Please tick the equipment required. Check the equipment for efficacy before issuing it out.

Equipment	Qty.		Equipment	Qty.
Camera (Type: _____)			Video tapes	
Tripod (Type: _____)				
Camera Carry Bag			Reflector/s (Type: _____)	
Light/s Sungun			Extension boards (Nos. _____)	
Light/s Portakit			XLR cables	
Mike (Type: _____)			RCA cables	
White board			Batteries (Type: _____)	
Battery charger (Type: _____)			AC/DC adaptors (Type: _____)	
BNC cables			Headphones (Type: _____)	
Wide conversion lens			Digital Still Camera, Bag, Accessories	

Any other equipment / accessories:

1. _____ Qty. _____
2. _____ Qty. _____
3. _____ Qty. _____
4. _____ Qty. _____
5. _____ Qty. _____

Date/s of shooting: _____ Duration: From _____ to _____

Returnable on: _____ at _____

Purpose: _____

Location/s: _____

Undertaking by the requestor: I/We shall return the above equipment in good working condition. I/We shall be personally responsible and compensate for **any** loss or damage to equipment.

Name/s of the requestor: _____ Phone number/s of crew members: _____

Signature of the requestor/ crew: _____

Date: _____