



## LOAN

Facility Report	
<b>Information about Borrower:</b>	
Name of Borrowing institution and the legal status	
Mailing address	
Shipping address	
Contact person	
Telephone Number	
Email address	
Web	
Open hours for public	
Is any other institution cooperating on this exhibition	yes <input type="checkbox"/> no <input type="checkbox"/> if yes, please name the cooperating institution/s:
<b>Purpose of loan:</b>	
Exhibition title	
Exhibition place	
Exhibition dates	
Dates of loan	
<b>General information:</b>	
What type of the building it is, and how many floor does it have	
What other activities take place in the building besides the exhibition	
Is smoking prohibited everywhere in the building	yes <input type="checkbox"/> no <input type="checkbox"/> if no, please describe the areas where the smoking is allowed:



Is your building located in an area designated as a flood zone or next to a body of water which can overflow its boundaries	yes <input type="checkbox"/> no <input type="checkbox"/>
Does the building have a loading ramp  In case there is no ramp how do you load objects	yes <input type="checkbox"/> no <input type="checkbox"/> <b>if yes, is it sheltered?</b> yes <input type="checkbox"/> no <input type="checkbox"/> dimensions:
Does the building have any access restraint	yes <input type="checkbox"/> no <input type="checkbox"/> if yes, please describe:
<b>Information about exhibition space:</b>  Is there a freight elevator	yes <input type="checkbox"/> no <input type="checkbox"/> if yes, dimensions and max. weight:
Are there any water fixtures or accessories such as plumbing pipes, sprinkler systems, water fountains, etc., located in or above temporary storage or exhibition areas	
What means of support do you plan to use for loan	wall <input type="checkbox"/> partition <input type="checkbox"/> tabernacle <input type="checkbox"/> panel <input type="checkbox"/>
Indicate the materials used in construction related to the installation of objects	
Mark your air conditioning and humidity controls	Centralized air-conditioning <input type="checkbox"/> centralized humidity control system <input type="checkbox"/> independent air-conditioning units <input type="checkbox"/> portable humidifiers <input type="checkbox"/> portable dehumidifiers <input type="checkbox"/> electric heating <input type="checkbox"/> steam heating <input type="checkbox"/> gas firing <input type="checkbox"/> other <input type="checkbox"/> describe:
How often are the environmental systems monitored and serviced in exhibition space	
What temperature and humidity range is maintained in exhibition space	
What is the light source in your exhibition space	Incandescent <input type="checkbox"/> Fluorescent <input type="checkbox"/> - with UV filter <input type="checkbox"/> daylight (windows, doors, skylight) <input type="checkbox"/> - shades, or drapes <input type="checkbox"/> - UV filtered <input type="checkbox"/>



Can you adjust the light	
How many hours a week / or daily are the objects light-exposed	
Do you have a special storage area for loan objects	yes <input type="checkbox"/> no <input type="checkbox"/>
How do you monitor an access to this storage area	
Do you have trained personnel for packing / handling objects	yes <input type="checkbox"/> no <input type="checkbox"/>
Is your site protected by electronic security	yes <input type="checkbox"/> no <input type="checkbox"/> if yes: centralized <input type="checkbox"/> entrance <input type="checkbox"/> windows <input type="checkbox"/> motion detectors <input type="checkbox"/>
Do you have security guards on duty during open hours	yes <input type="checkbox"/> no <input type="checkbox"/>
After open hours	yes <input type="checkbox"/> no <input type="checkbox"/>
Are displayed objects protected from physical contact	yes <input type="checkbox"/> no <input type="checkbox"/> if yes, describe how:

**Completed by:**

Name .....

Signature .....

Position .....

Date .....

**Please attach to this form following documents:**

- plan of exhibition space
- any other, in your opinion, useful information