



National Deaf-Blind Equipment Distribution Program (NDBEDP)

(800) 422-7930 V/TTY

(360) 339-7382 VP

(360) 902-8000 V/TTY

E-mail: ndbedp@dshs.wa.gov

(360) 902-0855 FAX

Web: www.dshs.wa.gov/odhh/Telecommunications/NDBEDP/NDBEDP.shtml

User Agreement

Name	Home Phone Number () ()	Message Phone Number () ()
Delivery Location		
E-Mail Address	Appointment Date	Appointment Time <input type="checkbox"/> AM <input type="checkbox"/> PM

Conditions

Below is a statement that explains your responsibilities as a recipient of equipment through the NDBEDP program. Please read the statement carefully and sign below. If you have any question, please ask your trainer or contact ODHH.

The equipment being issued to you is intended to be used to access telecommunication services.

I understand that:

- The cost of any service plans such as wireless or broadband services is my responsibility and will not be paid for or reimbursed by ODHH or the NDBEDP.
- I must protect the equipment from damage caused by rain, heat, physical abuse and negligence.
- If I misuse the equipment, I may not receive replacement equipment
- If the equipment is lost, I will report it to ODHH.
- If the equipment is stolen, I will file a police report and provide a copy of that police report to ODHH
- I cannot sell, pawn, or loan the equipment to anyone for any reason.
- If the equipment / software assigned to me is broken or not working right, I am responsible to contact ODHH to request repair under warranty. Once the warranty expires, the cost to repair will be my responsibility. (See attached NDBEDP FAQ for more information).
- If I move from my current address, I will notify ODHH of my new address and phone number.
- If I violate this user agreement I may be required to return the equipment and possibly be denied further participation in the program.

Equipment Type	Serial Number	NDBEDP Tag Number

I, the undersigned, have read and agree to the above User Agreement.

Client's Signature	Date	Relationship to Client (if different)
TED Trainer or Staff Signature		Date