

FACILITY REPORT
Traveling Exhibit

Borrowing Institution Profile

Name of Borrowing Institution/Loan Venue	
Contact Person	
Title	
Mailing Address	
Street Address	
Shipping Address	
Telephone Number	
Fax Number	
E-mail Address	
World Wide Web URL	
Purpose of Loan Request	
Dates at Loan Venue	

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NOTICE

It is understood that the information indicated in this form is critically confidential and will be used by the potential lending institution only in evaluating facilities of potential borrowers and in preparing applications for indemnity. This form must be stored in a secure location and no copies are to be made or distributed without the express consent of the subject institution. This form must not be distributed via fax.

Please attach a floor plan of the museum, indicating:

- where borrowed object(s) will be displayed
- receiving area
- location of reception areas
- location of portable fire extinguishers, fire suppression and detection systems

GENERAL INFORMATION

Check the type(s) that best describe your institution:

- Museum (not for profit)
 - Art
 - Natural History/ Anthropology
 - Children's/Youth
 - Historic House
 - History
 - Science
 - General
 - Other: _____
- University
 - Museum or Gallery
 - Student Center
 - Library
 - Department: _____
- Cultural Organization
 - Library
 - Religious Institution
 - Civic/Exhibition Center
 - Other: _____
- Other: _____

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Staff and Major Contractors

Provide information on key museum staff who will work with the traveling exhibition. Provide phone number, name, and title for each person. Attach a continuation sheet if necessary.

Position/ Title	Name	Telephone/Fax Numbers	E-mail Address	English speaking
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Work: Home: Fax:		Yes <input type="checkbox"/> No <input type="checkbox"/>

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Temporary Exhibition Space(s)

1. Indicate the layout of your temporary exhibition area(s):

- One large room Series of small rooms
 Other (specify) _____

2. Are any temporary exhibition spaces located in public activity areas such as lobbies, lounges, hallways, libraries, cafes, classrooms, etc.?

- Yes No If yes, please describe: _____

3. Are eating and drinking ever permitted in:

Temporary exhibition area(s)? Yes No

Temporary exhibition storage? Yes No

Receiving area? Yes No

Temporary exhibition preparation area? Yes No

If yes, please explain: _____

4. Do you make routine inspections for rodent, insect and microorganism problems?

- Yes No

If yes, describe how and frequency of inspections: _____

5. How are fragile, small or extremely valuable objects protected?

- | | |
|---|--|
| <input type="checkbox"/> Vitrines | <input type="checkbox"/> Cases secured with exposed screws |
| <input type="checkbox"/> Locking vitrines | <input type="checkbox"/> Cases secured with covered screws |
| <input type="checkbox"/> Wall/permanent cases | <input type="checkbox"/> Cases with sealed seams |
| <input type="checkbox"/> Free-standing cases (specify construction) | <input type="checkbox"/> Alarmed cases (specify type) |
| <input type="checkbox"/> Locked cases | |
| <input type="checkbox"/> Other (specify) _____ | |

If none of the above, is your museum willing to construct cases? Yes No

6. Are wall-mounted objects affixed to the wall with security screws/plates?

- Yes No

7. Are security guards employed?

- Yes No If no, please explain other means of security _____

In temporary gallery space(s)

Museum entrance

Museum exit

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Storage

1. Do you have a secured storage area for temporary exhibition objects? Yes No
2. Do you have a secured storage area for the storage of exhibition crates and other packing materials? Yes No

Handling and Packing

1. Do you have staff specially trained to pack and unpack museum objects?
 Yes No

If yes, how many? _____

Supervised by whom? _____

2. Are written incoming and outgoing condition reports made on all objects?
 Yes No

If yes, by whom? _____

Shipping and Receiving

1. What are your normal receiving hours? _____
2. What is the maximum size vehicle your loading area will accommodate? _____
Can it accommodate a 75' tractor trailer? Yes No
3. Describe your loading area, check all that apply:
 Raised loading dock
 Ground level dock
 Dock leveler/lift
 Forklift
 Shipping/receiving door (height: _____ width: _____)

Additional details _____

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Traveling Exhibit

Insurance

1. Which company provides insurance for your institution? _____

Broker's name	
Address	
Telephone number	
Fax number	

2. What coverage does your policy for borrowed objects provide? Please "X" all that apply:

- All –risk museum coverage, wall-to-wall (while on exhibit and in transit), subject to the standard exclusions
- Coverage against burglary and theft
- Coverage against fire
- Coverage against water damage
- Coverage against natural disasters (i.e., earthquake)
- Coverage against mysterious disappearance
- Coverage against employee dishonesty

3. What are the deductible limits of coverage for borrowed objects? _____

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Loan History

1. List several temporary exhibitions you have recently hosted:

Exhibition Title/Organizing Institution	Year

2. List other institutions you have borrowed from recently:

Name of Institution	Object Type	Year

3. Additional Information and comments:

Verification and Responsibility

The undersigned is a legally authorized agent for the subject institution and has completed this report. The information indicated provides a complete and valid representation of the facility, security systems and care provided to objects (both owned and borrowed).

Signature: _____

Typed Name/Title: _____

Date: _____