Company Phone Handover Agreement

| Company Name: | | |
|--|------------------------|-------|
| Agreement Date: | | |
| Employee Details | | |
| Employee Name | | |
| Position | | |
| Department | | |
| Employee ID | | |
| Device Information | | |
| Device Make & Model | | |
| IMEI Number | | |
| Serial Number | | |
| Accessories (if any) | | |
| The employee acknowledges receipt of the device listed above and agree company. The device must be used in accordance with company policies and for words. Any loss, damage, or theft of the device must be reported immediately. The device and all accessories must be returned upon request or upon tents. The employee is responsible for the proper care of the device. | ork-related activities | only. |
| Employee Signature & Date Authorized Company Representative & Date | | |