



Multimedia Resource Loan Request

P.O. Box 757, 14 Weymouth Street, Charlottetown, PE, C1A 7L7
Phone: (902) 368-5680 • Fax: (902) 368-5696

www.wcb.pe.ca

Multimedia Resource Requested:

Preferred Method of Delivery: Pickup at WCB office Mail

Borrower's Name:

Company:

Address:

City:

Postal Code:

Phone Number:

To Be Completed At Time Of Request:

Borrower's Signature: _____

Date: _____

I understand and agree the multimedia resource must be returned within two weeks of the date issued.

For Occupational Health And Safety use only:

Delivery Method: Pickup at WCB office Mail

Date Borrowed: _____ **Date Returned:** _____

OHS Staff Member Receiving Return: _____