

**Hong Kong Baptist University**  
**Office of Student Affairs**  
**Undergraduate Halls**

RL19-0

**Record of Large\* or Electrical Items Being Brought Into the Halls**

(\*With Length, Width OR Depth larger than 1 metre)

**A) Resident's Particulars**

Name of Resident: \_\_\_\_\_  
 Student No.: \_\_\_\_\_

Contact No.: \_\_\_\_\_  
 Room No.: S/N \_\_\_\_\_ L/R/A/B/C

**B) Particulars of Items**

Description of Items	Electrical appliances	Furniture	Volume (cm)	Expected date of removal
1.	<input type="checkbox"/> (_____kwh)	<input type="checkbox"/>	L____ x W____ x H____	
2.	<input type="checkbox"/> (_____kwh)	<input type="checkbox"/>	L____ x W____ x H____	
3.	<input type="checkbox"/> (_____kwh)	<input type="checkbox"/>	L____ x W____ x H____	

Will the items above be **used** in the a) Halls?  Yes  No

Remarks: \_\_\_\_\_ b) Bedrooms?  Yes  No

**C) Declaration**

1. I understand that I am allowed to bring in the above item(s) **tentatively** and I will follow the instructions of the security guards and complete this record.
2. I understand that the approved item(s) must be placed and used at the designated location. Otherwise, the item(s) will be confiscated and future application may not be accepted.
3. I understand that I am responsible for informing my roommate(s) that the item(s) will be placed and used at our room.
4. After review by the Hall Management, I understand that I might be asked to stop using and remove the item(s) from the Halls based on safety and security reasons.
5. I agree to respect and follow the orders of the Hall Management, and follow the rules and regulations of the Halls. I will pay attention to safety, and use the item(s) in a proper and lawful manner.
6. I agree to provide any proof to fulfil the safety standard as required by the Hall Management. For example, fire resistance proof for the mattress and the upholstered furniture. Failing which the items may not be allowed to be brought into the Halls.
7. I understand that the University will not be responsible for any loss or damage resulted from the use and/or storage of the above item(s), and I will indemnify the University for any claim of loss or damage resulting from the use and/or storage of the above item(s).

Signature: \_\_\_\_\_ Entry Time: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only**

保安員 : (簽名/日期) \_\_\_\_\_ G4 Record (Sign /Date): \_\_\_\_\_ 1 – TT 2 – SSHO / ASHM

Tech Team : (Sign /Date) \_\_\_\_\_ OK/Out/ \_\_\_\_\_ Reasons: \_\_\_\_\_

SSHO/ASHM: (Sign /Date) \_\_\_\_\_ OK/Out/ \_\_\_\_\_ Reasons: \_\_\_\_\_

Action Completed: \_\_\_\_\_ Sign /Date: \_\_\_\_\_