

Live Works Project#: \_\_\_\_\_

## LIVE WORKS PROJECT

SOP 108.12

Completion Date: \_\_\_\_\_

Attachment 1

01/09/25

## REQUEST FORM

**Facility:** \_\_\_\_\_

**AGENCY/REQUESTOR'S NAME** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**VEHICLE DESCRIPTION:** YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_

COLOR \_\_\_\_\_ LICENSE PLATE \_\_\_\_\_ MILEAGE \_\_\_\_\_

**ITEM DESCRIPTION (IF NOT VEHICLE):** \_\_\_\_\_

**DESCRIPTION OF WORK REQUESTED:** \_\_\_\_\_

**AGREEMENT:** The undersigned requestor accepts full and complete responsibility for the above named item or any part thereof, while it is on the premises of the Georgia Department of Corrections. The undersigned owner agrees that no liability will be attached to the agency, the employee(s) or the trainee(s) for any damages, loss, or theft of the above named item/motor vehicle. It is further understood and agreed that the undersigned owner:

1. Understands any vehicle, materials or supplies entering or exiting the institutions premises is subject to be searched.
2. Will furnish all parts and materials required for repairs and if any parts or materials are required the owner will personally deliver them to the facility and give them to the appropriate instructor.
3. Understands that all work performed will be in accordance to the instructional plan.
4. Understands that no set time of completion is made or implied and that there is no guarantee of any kind is made or implied in regards to the work performed.
5. Understands if the item is a motor vehicle, a thorough inspection will be completed by owner. All personal belongings, items of value, weapons or objects that can be used as a weapon are to be removed **prior** to service being done. Owner also understands that he/she is responsible for dropping off and picking up the vehicle from the institution.
6. Realizes at no time will compensation or tips be given to offenders for service.

**ANY AUTO MECHANICS AND/OR AUTO DETAILING THE REQUESTOR MUST PROVIDE A VALID COPY OF INSURANCE PRIOR TO APPROVAL. NO EXCEPTIONS.**

I agree to have the above work performed; all material will be paid for by me before delivery to the GDC Facility at no cost to GDC. I understand that the Georgia Department of Corrections cannot be held liable for any damage, defects, or workmanship.

\_\_\_\_\_  
Requestor Signature

\_\_\_\_\_  
Date

\*\*\*\*\*FACILITY USE ONLY\*\*\*\*\*

☐ APPROVED ☐ DENIED

Comment: \_\_\_\_\_

\_\_\_\_\_  
Live Works Coordinator

\_\_\_\_\_  
Date