



Lucius E. & Elsie C. Burch, Jr. Library Interlibrary Loan Request

Please Print

Date _____

Name _____

Library Card No. _____

Required information

Phone _____

e-Mail Address _____

Address _____ City _____ State _____ Zip _____

BOOK

Title _____

Author(s) _____ Edition _____

Publisher _____ City of Publ. _____ Year Publ. _____

Vol. & Page _____ Series (if any) _____ ISBN/ISSN _____

Date needed by _____

BY SIGNING THIS FORM I AFFIRM THAT I UNDERSTAND AND AGREE TO COMPLY WITH THE FOLLOWING:

- to expect a 2 to 6 week average wait, depending upon the item's availability at the supplying library.
- to pick up/return all loans on time to Collierville Burch Library Circulation Desk.
- to pay any cost levied by the supplying library for loss/damage and/or for late fees.
- to realize that I cannot cancel my request once a lending library has been contacted, and **that all loans will involve service costs of \$2.00 per item.**
- to request renewals at least one week before the due date.
- overdue fines will be \$1.00 per day per item.

CUSTOMER SIGNATURE _____ (if you are 17 or younger, you need a parent/guardian's signature)

Date Ordered _____ Request # _____ Date Received & Staff Initials: _____

Lending Library _____ Date Due _____ Date Returned _____