



## 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](http://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:** \_\_\_\_\_