

**Do not Remove this Tag Unless Authorized.
This equipment is temporarily out of order.**



Describe Tool Malfunction and Safety Concern: *(for safety please be detailed)*

Dodd Studio Support was notified by:

(Name) _____ (date) _____

Repair and Reinstatement of this equipment is estimated:

(Date) _____



**Lamar Dodd School of Art
UNIVERSITY OF GEORGIA**