



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

**DARTMOUTH HERITAGE MUSEUM SOCIETY**  
**Provisional Custody/Temporary Donation Agreement**

*To the collection of the Halifax Regional Municipality, managed by the Dartmouth Heritage Museum Society*

The following material is being placed in the custody of the Dartmouth Heritage Museum Society (DHMS) to be considered for donation to the Dartmouth Heritage Museum (DHM), which is owned by the Halifax Regional Municipality (HRM), and managed by the DHMS. The decision will be made by the Collections Management Committee. Upon acceptance into the collection, the donor will be sent a Deed of Gift form. The execution of the Deed of Gift form by the donor will make the donation final.

Description of material	Condition of material
_____	_____
_____	_____
_____	_____
_____	_____

For additional listing, see verso.

Owner's name (print) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Depositor's name (if different) (print) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

I affirm that I own the material and to the best of my knowledge have good and complete right, title, and interest, or have the permission of the owner, to place this material in the provisional custody of the DHMS, to be considered for donation into the DHM collection, which is owned by the HRM and managed by the DHMS. If not accepted into the DHM collection, it may also be considered for the working collection, which is the responsibility of the DHMS and used for public programming.

I understand that if the material is not accepted into the collection, I will so be notified, at the address above. The material must be picked up within 90 days of this notification, or it becomes the property of the HRM, which reserves the right to retain or dispose of the material.

Neither the DHMS, nor the HRM, is responsible for the safekeeping of material provisionally entrusted to it for consideration of donation, beyond the exercise of the precautions the DHMS and the HRM uses for the safekeeping of its own property.

Insurance of the material is the responsibility of the owner. Object(s) is/are insured by owner: Yes \_ No \_

Signature: \_\_\_\_\_ Owner \_\_\_\_\_ Depositor \_\_\_\_\_ Date: \_\_\_\_\_

Signed on behalf of the DHMS: \_\_\_\_\_ Title: \_\_\_\_\_

I acknowledge return of the material in satisfactory condition.

Signature of depositor or owner \_\_\_\_\_ Date of return \_\_\_\_\_

**For Office Use Only:** *(To Be Completed Upon Review by CMC)*

Date of review by the Collections Management Committee: \_\_\_\_\_

Action recommended by the committee: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Chairman: \_\_\_\_\_

Action Taken: \_\_\_\_\_

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

By Whom & Title: \_\_\_\_\_