



995 Worthington Street, Springfield, MA 01109
Telephone 413-734-5376 FAX 413-737-7949

USE OF CELL PHONES AGREEMENT

I, _____, agree to use MHA’s cell phone for its intended use as designated by each Program. I understand that any non-business calls that are made while the phone is in my possession will be my responsibility to pay. If the cell phone is lost or stolen while in my possession, I will report the incident immediately to my supervisor. I further understand that if the phone and/or charger is lost or stolen while it has been assigned to me or I fail to surrender these items upon termination, I will be charged the cost incurred by MHA to replace the phone and/or charger plus a \$5 administrative fee. If I submit a police report for the stolen cell phone, there will not be a charge.

Further, I authorize MHA to deduct all fees associated with the non-business use or loss of the cell phone and/or charger from my paycheck.

Signed: _____

Date: _____

Assigned Primary User

I understand that I have the assigned primary control over a cell phone. With this responsibility, I understand that I must have any employee who will be using the cell phone sign a USE OF CELL PHONES AGREEMENT before giving the employee responsibility of the cell phone. If the phone is lost or stolen and the employee has not signed an agreement, I will be charged the cost incurred by MHA to replace the phone plus a \$5 administrative fee.

Further, I authorize MHA to deduct all fees associated with the loss of the cell phone and/or charger from my paycheck.

Signed: _____

Date: _____