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| Un dibujo animado con letras  Descripción generada automáticamente con confianza media | **PRÉSTAMO DE EQUIPOS Y/O ELEMENTOS**  **GEODÉSICOS Y TOPOGRÁFICOS DEVOLUTIVOS**  GESTIÓN DE INFORMACIÓN GEOGRÁFICA PARA EL SAT  GESTIÓN GEODÉSICA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **FECHA DE PRÉSTAMO** | | | | | | |
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| **FUNCIONARIO** | | |  | **CONTRATISTA** | | | | |  |  |  | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | Nombres y Apellidos | | | | | | | | | | | |  | No. De Identificación | | | | | | | | | | | | | | | | | | | |  |
| **SALIDA DEL** | | |  | | | | | **AL** |  | | | | | | | | | **PROYECTO:** | | |  | | | | | | | | | | | **LUGAR:** | | | |  | | | | | | | |  |
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| **TEMÁTICA A EJECUTAR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Fotocontrol | | | | |  | Clasificación | | | | | |  | Nivelación | | | | | |  | Levantamientos topográficos | | | | | | |  | Redes | | | | |  | |  | | | | | | | | | |
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| Densificación | | | | |  | Control Calidad | | | | | |  | Fronteras | | | | | |  | Peritazgo | | | | | | |  | Otro | | | | |  | | ¿Cuál? | | | |  | | | | |  |
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| **EQUIPO** | | | | | | | | | **CANTIDAD** | | | | **MARCA** | | | **SERIAL** | | | | | | **PLACA** | | | **ESTADO DE SALIDA** | | | | **ESTADO DE REINTEGRO** | | | | | **OBSERVACIONES** | | | | | | | | | | |
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| \* B: Bueno R: Regular D: Dañado  **A.E.G.T :** Administrador de Equipos Geodésicos y Topográficos  Tanto el servidor público que entrega (A.E.G.T) como el que recibe el equipo, con su firma en este formato, constatan que verificaron el listado de chequeo de accesorios del equipo. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| La persona a cargo del equipo y sus accesorios se hace responsable por cualquier daño o pérdida causado por negligencia, descuido o mal uso; además queda terminantemente prohibida la salida o el uso de estos equipos, fuera de los límites territoriales de Colombia. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |
| **AUTORIZA: Subdirector** | |  | | | | |  |  | | | | | |  | **ENTREGA**  **(A.E.G.T)** | |  | | | | | | | |  |  | | | |  | **QUIEN RECIBE:** | | | | | |  | | | |  | |  | |
| Nombre | | | | | Firma | | | | | |  |  | | Nombre | | | | | | | |  | Firma | | | |  |  | | | | | | Nombre | | |  | | Firma | | |
| **QUIEN**  **REINTEGRA:** | |  | | | | |  |  | | | | | |  | **RECIBE**  **(A.E.G.T)** | |  | | | | | | | |  |  | | | |  | **FECHA DE**  **REINTEGRO:** | | | | | |  | | | | | | | |
| Nombre | | | | | Firma | | | | | |  | Nombre | | | | | | | | Firma | | | |  | AAAA-MM-DD | | | | | | | |