



Hart House Circle 7 Toronto, Ontario M5S 3H3 artmuseum.utoronto.ca

# NEW ART ON CAMPUS APPLICATION & ART MOVE REQUEST FORM

Before completing the Art on Campus application form, please ensure you have read and understand the Frequently Asked Questions on the <u>Access to Collections page</u> of the Art Museum's website.

Page 1	Part 1.A: Application for new art
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#### **PART 1.A:** APPLICATION FOR NEW ART

Please complete Part 1.A of the application and return with a completed floorplan of the intended space. For more than one space, please complete Part 1.B and submit with floorplan(s). Forward completed forms to artoncampus@utoronto.ca.

#### **CONTACT INFORMATION**

Department:	
Phone:	Ext.
Address:	
Email:	
Department Contact:	
Title/Position:	
Building Code:	





### **BORROWING UNIT & BILLING INFORMATION**

Department Contact for	billing:				
Title/Position:					
Phone:	Ext.				
Email:					
Department/Unit Author	rity to Approve Expense	es:			
UTORid of Department	/Unit Authority:				
UTORid of additional c	ontacts:				
Property Manager					
SITE INFORMATION	ON				
Building Name:		Room Number:			
Does your unit currently	y have art on loan from t	he Art Museum?			
Number of rooms artwo	ork is requested for:				
Describe function of room (i.e. hallway, lobby, meeting room):					
Is food and drink served	l in the proposed space?				
Please check all fields a Security:	that are relevant to the	proposed display location			
Locks:					
Access:					
Security Camera:					
<b>Room Specifications</b>					
Length:	Width:	Height:			
Wall Material:					





If other, please specify:

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Asbestos: Exterior Walls:

Windows

If so, how many: If so, what kind: Do they open?:

Directions windows face:

Window treatments: If so, what kind:

HVAC Ducts: AC Units: Conduits: Other:

Please attach a plan of the space. Clearly indicate placement of doors, windows, vents, etc and if they are locked/open. PDF maps of most buildings are available on the <a href="University Planning, Design & Construction website">University Planning, Design & Construction website</a>.

ADDITIONAL INFORMATION





SITE INFORMATION

# **PART 1.B: ADDITIONAL ROOM APPLICATION**

Fill out the form below if requesting artwork for more than one space. If not applicable, leave blank and proceed to complete Part 3: Applicant Agreement.

Building Name:		Room Number:	
Does your unit currently have a	rt on loan from the Art M	useum?:	
Number of rooms artwork is rec	quested for:		
Describe function of room (i.e.	hallway, lobby, meeting r	room):	
Is food and drink served in your	r proposed space?		
Please check all fields that are Security	relevant to proposed di	isplay location:	
Locks:			
Access:			
Security:			
Security Camera:			
Room Specifications Room dimensions:			
Length:	Width:	Height:	
Wall Material:			
Asbestos: Exterior Wall	s:		
Windows If so, how many:			
Directions windows face:	Do they open:		
Window treatments:	If so, what kind:		
HVAC Ducts:	AC Units:	Conduits:	Other:





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Please attach a plan of the space. Clearly indicate placement of doors, windows, vents, etc and if they are locked/open. PDF maps of most buildings are available on the <a href="University Planning">University Planning</a>, <a href="Design & Construction website">Design & Construction website</a>.

**ADDITIONAL INFORMATION:** 





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# **PART 2: ART MOVE REQUEST**

You may wish to request to move artwork in your unit for the purposes of a loan swap, or simply to remove loaned art from your unit on a temporary or permanent basis. If requesting a move for a loan swap, please fill out Part 2 after a site visit has been completed and artworks are selected.

Please note that your unit is responsible for costs associated with the deinstallation and transportation of artwork.

Please complete each field of the application and return completed documents to artoncampus@utoronto.ca.

Please check all fields relevant to the proposed display location:

Contact Information	
Department:	
Phone:	Ext:
Address:	
Email:	
Department Contact:	
Title/Position:	
Building Code:	
Borrowing Unit and Billing l	nformation
Department Contact for Billing:	
Title/Position:	
Phone:	Ext.
Email:	
Department/Unit Authority to Ap	prove Expenses:
UTORid of Department/Unit Aut	hority:
UTORid of additional contacts:	
Property Manager:	





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Reason	tor	mava
ixcason	1171	

Renovations: Staffing:

Other (please specify):

This move is:

Permanent: Temporary:

#### Works to move

How many artworks in total require moving?

Describe each artwork (e.g.: 3 x 7ft painting of red poppies) and where it is currently located (e.g.:

Dean's Office, rm 101, south wall). If you have title or artist information, please provide it:

## ADDITIONAL INFORMATION:





# FUTURE LOCATION SITE INFORMATION

(If Reason for Move is	Return to Art Museum, l	Permanent, leave blank.)
Building Name:		Room Number:
Does your building cur	rently have art on loan fr	om the Art Museum?
Number of rooms art is	requested for:	
Describe function of ro	om (i.e. hallway, lobby):	
Is food and drink serve	ed in the space?	
Security:		
Locks:		
Access:		
Security Camera:	Security:	
<b>Room Specifications:</b>		
Room dimensions:		
Length:	Width:	Height:
Wall Material:		
Exterior Wall:		
Asbestos:		
Windows:	D 1	
If so, how many: Directions windows fac	Do they open?:	
Directions windows law		
Window treatments:	If so, what kind:	

**Please attach a plan of the space.** Clearly indicate placement of doors, windows, vents, etc and if they are locked/open. PDF maps of most buildings are available at <a href="http://osm/utoronto.ca/osm/inv.html">http://osm/utoronto.ca/osm/inv.html</a>.

Other:

Conduits:

### **ADDITIONAL INFORMATION:**

**HVAC Ducts:** 

AC Units:





# ADDITIONAL ROOM APPLICATION

(If	Reason	for N	Move	is F	Return	to.	Art	M	useum,	P	ermanent,	leave	bl	anl	<b>K.</b> )	Ì
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Building Name:			Room Number:
Does your building	currently have	e art on loan f	From the Art Museum?
Number of rooms a	rt is requested	for:	
Describe function of	of room (i.e. ha	llway, lobby)	:
Is food and drink so	erved in the sp	ace?	
Security:			
Locks:			
Access:			
Security Camera:	Security:		
Room Specification	ons:		
Room dimensions:			
Length:	Width:		Height:
Wall Material:			
Exterior Wall:			
Asbestos:			
Windows: If so, how many:	Do t	hey open?:	
Directions window	s face:		
Window treatment	s: If so,	what kind:	
HVAC Ducts:	AC Units:	Conduits:	Other:
Please attach a plan (	of the space. Cl	early indicate p	placement of doors, windows, vents, etc and if they

are locked/open. PDF maps of most buildings are available at <a href="http://osm/utoronto.ca/osm/inv.html">http://osm/utoronto.ca/osm/inv.html</a>.

## **ADDITIONAL INFORMATION:**





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### **PART 3: APPLICANT AGREEMENT**

By submitting this form you are confirming the following:

- a) I have read and understand the Frequently Asked Questions (on the <u>Access to Collections page</u> of the Art Museum's website.)
- b) The information I have provided is true and correct.
- c) The department will pay for all costs associated with the Art on Campus New Art Installation including deinstallation, transportation, asbestos drilling, framing, installation, identifying plaques, etc.
- d) The department will abide by the conditions outlined in the Loan Agreement that will be issued by the Art Museum.

the Art Museum.			
Borrower Name (Please Print	t):		
Borrower Signature:			
Department/Title:			
Date:			





INTERNAL USE ONLY
Date Request Initiated:
AMUT Lead:
Countersigning Staff Name:
Signature:



