

# New Hampshire Automated Information System

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## Interlibrary Loan Registration

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**PLEASE PRINT CLEARLY  
ALL INFO MUST BE FILLED IN**

HSA code: \_\_\_\_\_

Library Name: \_\_\_\_\_

ILL contact person: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **Interlibrary loan agreement**

By signing below I agree to the following on behalf of my library:

- 1) To act as an ILL supplier within NHAIS
- 2) To check our ILL requests each day the library is open
- 3) To answer all ILL requests within 24 hours
- 4) To notify all ILL users if unable to respond to requests for an extended period
- 5) To make our ILL policies available to other participating libraries
- 6) To place comparable or smaller sized libraries first in our library search strings
- 7) To add holdings for all current acquisitions cataloged by our library to the NHU-PAC in a timely manner

Signature of Library Director: \_\_\_\_\_

Print Name of Library Director: \_\_\_\_\_

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

2/22/2018