

REQUEST FOR SPACE IN BUILDING 250

LABORATORY REQUIREMENTS

QUIET LABORATORY

ULTRA-QUIET LABORATORY

CUSTODIAN

NAME	CODE
EMAIL	PHONE

LABORATORY INFORMATION

EQUIPMENT TO BE HOUSED

DESCRIPTION OF INTENDED USE

REQUIRED SERVICES (*i.e. power, gases, chilled water, etc.*)

JOB ORDER NUMBER (This JON will be used for all costs referenced in the Standard Operating Procedures)	DURATION REQUESTED
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APPROVALS (Must be complete before Code 1100 will review)

REQUESTING STAFF MEMBER

NAME (<i>Branch Head</i>)	CODE
SIGNATURE (<i>Branch Head</i>)	PHONE

It is agreed this Request for Space will comply with Standard Operating Procedures for Quiet and Ultra-Quiet Laboratory Space.

NAME (<i>Division Superintendent</i>)	CODE
SIGNATURE (<i>Division Superintendent</i>)	PHONE

CODE 1100 RECOMMENDATIONS

ACCEPT	REJECT	SIGNATURE (<i>Director, Institute for Nanoscience</i>)	DATE
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COMMENTS

CODE 1001 APPROVAL

ACCEPT	REJECT	SIGNATURE (<i>Director of Research</i>)	DATE
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COMMENTS