

Environmental Central Facility

Service/General Equipment Request Form

User Name :	Tel :	E-mail :
Department :		
Status : <input type="checkbox"/> Staff <input type="checkbox"/> RA <input type="checkbox"/> PGRA	Staff/Student ID No. :	
Type of Project Related :	<input type="checkbox"/> RGC <input type="checkbox"/> UGC <input type="checkbox"/> Government <input type="checkbox"/> Industry <input type="checkbox"/> Others	
Project Title & Code :		
Service/Equipment request starting time and duration From :		To :

(A) Service Request

Summaries of Service requested :

(B) General Equipment Request

Name of Equipment requested :

Purpose :

Are you a Qualified Laboratory User¹? Yes No *

Remarks :

(1) A Qualified Laboratory User must be :

(i) a frequent laboratory user in his/her own department, and

(ii) has completed all necessary HSEO Mandatory Safety Training Course

(2) There is no charges for this equipment, however Users are required to bring their own consumables.

(3) Users will be responsible for the maintenance cost incurred if equipment is damaged during experiment.

(4) Office Hour : 0900 - 1230, 1400 - 1715 on every weekday.

Request confirmed by Supervisor/Project PI

Name : _____ Tel : _____ E-mail : _____

Signature : _____ Date : _____

Please send the completed "Request Form" to room 4109