

Center-wide Equipment Maintenance/Repair Request Form

(For CNRC laboratory or core equipment that is not on service contract and with original cost in excess of \$5,000)

Procedures/Guidelines:

- Provide answers to all questions.
- After completing this form, *click the submit button and attach the following documents to the generated email:
 - a) Instrument logbook in PDF format showing the usage and maintenance record for the past 6 months.
 - * **Request without usage and maintenance record will not be considered for support without appropriate justification.**
 - b) Repair quotation in PDF format.
- Your request will be reviewed by the Space and Equipment Committee.
- You will be notified of the decision by e-mail.
- Any expenses incurred without the prior approval of the Committee are the sole responsibility of the investigators.
- Please re-submit your request if the final cost of repair is 20% or \$500 higher than the estimated cost.
- Any expenses incurred above this level that are not approved prospectively by the Committee may be the responsibility of the requesting investigator(s).
- Is this equipment purchased with CNRC Funds? , NIH Funds? , Other Funds?
- Explain how this equipment is shared among CNRC scientists?
- Is there similar equipment within the Center, and if so, why is this equipment not considered redundant?
- Does the attached quote cover the cost of service and parts?
- When submitting this request, please obtain an accurate estimate of the total costs. You will be asked to resubmit if total costs deviate by more than 20% from the submitted request.
- If this request is approved, it is expected that the repair be completed within 3 months. If delays arise, please contact the Committee to explain the situation.
- **Instrument that has been down for more than two (2) weeks will not be considered for support by the program without appropriate justifications.**

Date: (enter the /s in mm/dd/yyyy format) or pull-down				
Name of requestor: (Name of supervisor for non-faculty)				
E-mail addresses of requestor and supervisor				
Equipment				
Location of equipment				
BCM and/or CNRC tag numbers				
Approximate age of equipment				
Replacement cost of equipment				
Estimated cost of repair				
Cause(s) of breakdown: put a "✓" mark next to the appropriate answer(s)				
Normal wear and tear	<input type="checkbox"/>		Electrical	<input type="checkbox"/>
Potential misuse	<input type="checkbox"/>		Mechanical	<input type="checkbox"/>
Symptoms:				

Committee's recommendation: (Please put a "✓" mark underneath your name)

	Bacha	Moran	Shen	Wu	Xu	Ogden	Hirschi
Approve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disapprove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* If the Submit Form button on this form does not generate an email from within your browser, download the form and then use the Submit Form button.