

3-D Printer User Authorization

Department:	
Name:	
Phone:	
Email:	
Principal Investigator Name (PI):	
Standard Operating Procedure (SOP):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Safety Data Sheet (SDS):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Building/Room#	

Please submit your SOP, SDS, and other materials you deem important along with this application. Additionally, EH&S needs to assess location of printer, prior to 3-D printer being ordered.

Also, if you are going to purchase several different models, you must fill out an application for each model.

# of 3-D printers	
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3-D Printer Information

3-D Printer Make:	
3-D Printer Model	
Serial #:	

3-D Printer Material Media

Thermoplastic Material:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Material Name:	
Support Material:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Material Name:	
Metal Material:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Material Name:	
Will you be producing any hazardous waste (resin)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Signature

EHS Signature

Submittal Date	Approval Date
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