



EQUIPMENT USAGE REQUEST FORM
(U of T registered users ONLY)

User Name:

Date:

E-mail:

Department :

Supervisor/Account Holder:

Required Instrument:

<-- Choose the instrument to activate these fields

Cost Centre:

CF Centre:

Fund:

Authorization valid from:

to

User Signature

Authorized Account Holder Signature

***Attention: Users are liable for the cost of any damage from misuse and/or abuse of equipment.
Please retain a copy for your files.***

- The user **MUST** bring this form completed with both signatures in order to be able to book the instrument.
- You can book the instrument a week in advance!
- Contact Dr. Cobas Acosta at raiden.acosta@utoronto.ca if you would like to become a registered user.
- To request a service, please use the **SERVICE REQUEST FORM** available online.