|  |
| --- |
| **To make this process as easy as possible, before you start filling out this form, contact Russell McClanahan, IRIC Facility Manager (885-1527) to support you in its completion. After completion, submit this form to IRIC Facility Manager at iric@uidaho.edu.**  |
| **Background:** 1. Fill out form to install equipment or request project specific building modifications in IRIC. The facility manager will forward to the IRIC Facility Committee for approval. If the equipment/modification is tied to a new project, also complete the project initial screening process.2. After IRIC Facility Committee approval the facility manager will work with the PI and facilities to complete the installation or modification. |
| **Requestor Name(s):**       | **Submittal Date:**       |
| **Department(s)/Unit(s):**        | **Phone No:**       |
| **Equipment or Project specific building modifications description:**       |
| **Is this a collaboration among multiple faculty members?**        **If so, which unit(s)?**       **Other units that will support performance of this work scope:**        |
| **Customer/Sponsor:** (Identify the agency that is sponsoring the work and providing the funding.) This is not required for projects that are not receiving external funding.  |
| **Sponsoring Agency:**      **Internal Funding Program (e.g., Seed Grant):**      **Budget# (If applicable):**      **\*\*The requester is responsible to arrange for payment of any costs associated with equipment installation or project specific building modifications.** |
| **Schedule:** (Provide estimated date the equipment/modifications need to be completed).       |
| **Proposed Location:** (Identify the space where equipment or building modifications will need to be installed/performed).       |
| **Installation:** Who will be doing the installation and/or associated modifications (IRIC facility manager can help coordinate)?:       |
|  |
| **IRIC Committee Decision and Comments**: [ ]  Accept Comments:       [ ]  Pending Comments:       [ ]  Decline Comments:       |

|  |
| --- |
| **Signatures:** |
| **IRIC Facility Committee Chair:** |       |
| **IRIC Facility Manager:**       | **Dept Chair:**       |
| **Dept Chair:**       |
| **Dept Chair:**       |
| **Dept Chair:**       |
| **Dept Chair:**       |