EPR Facility Use Form January 7, 2009

Name: Resea	arch group:	
Email:		
Account number for charges:		
Type of sample(s):		
any hazardous materials?		
Measurements to be done (describe in some	detail):	
(T. b. 6'll. 14 b. EDD E. 'l'4.)		
(To be filled out by EPR Facility)		
Spectrometers to be used:		
Cryostats to be used:		
Cryogens for sample:		
Rates: Cryogens for magnets: Consumables/cryogens supplied by EPR Fa Assistance by EPR Manager:	\$2.50/hour cility: at cost \$26.50/hour	
Charges:	Estimate:	Final:
Hourly rate used:		
Number of hours:		
Charge based on hourly rate:		
Extra charges (consumables or breakage):		
TOTAL:		
EPR Manager signature:		
Damage caused by a user or by undisclosed	hazards are charged to t	he user.
Faculty signature/approval/		