

## Request of Use of Seawater Systems

### A. UNCW user information

Name: \_\_\_\_\_ UNCW phone: \_\_\_\_\_  
Unit or department: \_\_\_\_\_ UNCW email: \_\_\_\_\_

### B. Non-UNCW user information

Name: \_\_\_\_\_ Phone (with area code): \_\_\_\_\_  
Institution/Organization: \_\_\_\_\_ Email: \_\_\_\_\_  
Address (street, state or province, ZIP or postal code): \_\_\_\_\_

### C. Request

Area for which use is requested: \_\_\_\_\_ Briefly describe your need (room #, # of mecoscosms, duration of use): \_\_\_\_\_  
(note use of mesocosms will need to be coordinated with research groups that maintain the tanks)

Indoor wetlab space

Outdoor tank space

Outdoor open space

**YES NO**

This use require construction or modification of the existing facility

Description of construction/modification is attached

Have you consulted with seawater staff regarding construction?

Do you have seawater needs beyond what is currently available

Start Date: \_\_\_\_\_ End date: \_\_\_\_\_

Will activity require use of any hazardous materials, radioisotopes, etc.? If yes, explain below. Yes No

If yes have you contacted Environmental Health & Safety (962-3057)? Yes No

Contact information for supervisor on day(s) of proposed activity:

Name of responsible person: \_\_\_\_\_

Phone (with area code): \_\_\_\_\_