

INSTRUCTIONS

Step 1: Registered User (RU) Information

This section of the form is used to identify the person who is applying for funding assistance. Using the spaces on the form, please provide the following information:

- RU #:** Enter the 4-digit Registered User number assigned to the applicant. If a number has not been assigned or is not known, leave this entry blank.
- RU Name:** Enter, at a minimum, the first and last name of the applicant.
- RU Phone:** Enter the number of a phone that can be used to reach the applicant (personal office phone, Departmental office phone, supervisor's phone, etc.).
- RU Department:** Enter the name of the applicant's department. If the applicant works for more than one department, please list the department name shown on the applicant's payroll sheet.
- RU Email:** If the applicant has an email address, please provide it, otherwise leave this entry blank.

Step 2: Request Details

This section of the form is used to specify the storage unit being replaced (if any), describe the hazardous materials storage unit being requested, and provide a brief explanation concerning how safety will be improved by the replacement. Select only one type of storage unit per request. If you need more than one unit or more than one type of unit, please complete and submit a separate request form for each. Using the spaces on the form, please provide the following information for the hazardous materials storage unit being requested.

- Type of Request:** Place an "X" in only one of the three boxes to specify the type of storage unit being requested. Examples of these storage unit types can be found at the end of these instructions.
- Supplier of the item requested:** Enter the name of the company that sells the storage unit being requested. EHS suggests giving preference to products sold by Fisher due to existing contracts.
- Stock #:** Enter the supplier's catalog or stock number for the storage unit.
- Description:** Provide a brief description of the storage unit.
- Price:** Enter the price of the storage unit in US currency and check the box indicating whether the price specified is the supplier's list price or a discount price.
- Item to be replaced (if any):** Provide a brief description of the existing storage unit being replaced by the requested unit if the request is approved. Leave this space blank if no existing storage unit will be replaced.

How will this improve safety?: Provide an explanation of how the storage unit being requested will improve safety in the work spaces under the applicant's control.

Step 3: Installation Information

This section of the form is used to specify the installation of the storage unit being requested as well as the funding of the installation, if it is needed. The Safe Storage of Hazardous Materials Program does not provide funds for installation. If installation is required, funds must be available and approved in order for the request for the storage unit to be approved. Place an "X" in only one of the five boxes to specify the type of installation required.

Completed forms must be sent to the Department of Environmental Health and Safety either by campus mail to EHS-HMM, 8 RPDB or by fax to 573-882-7940. EHS will review the form for completeness and merit. The applicant will be informed of the outcome of the review.

If you have additional questions or require more information, please contact EHS by phone at 573-882-7018 or by email at ehs@missouri.edu.