Please bring completed form to Anthony Vitan 151 Le Conte Hall Access Transaction Hours are: Monday-Friday 9:00 AM to 12:00 PM

DO NOT FOLD THIS FORM. Folded or wrinkled forms will not be accepted.

University of California Berkeley				Department	
Liquid Nitrogen Access				PHYSICS	
A APPLICANT INFORMATION- TO BE FILLED OUT BY APPLICANT- PLEASE PRINT CLEARLY					
Last Name	First Name	First Name Yo		Our RESEARCH or GROUP Name:	
UC Status Undergrad Grad Postdoc Staff F		Faculty Visitor	☐ Visitor ☐ Other		
Your Facility or Office Room Number and Building N	ame Your Facility or Office Phone Number Your		Your e-mail ac	r e-mail address	
Your Home Address	City	State and Zip Co	ode Your Ho	ome Phone Number	
Your Student/Employee Number	Your Cal ID Card number (on the back of your card)			cation Date	
B ACCESS AGREEMENT-TO BE READ AND SIGNED BY APPLICANT					
1. I will immediately report the loss of any University key or card key to my supervisor, UCPD and the issuing department's Access Controller. A UC police report reference number is required before replacement keys can be issued. 2. I will not lend exchange or give a University key or card key to anyone, unless told to do so by the issuing department's Access Controller. Key serial numbers are recorded at the time of issue and key deposit refunds can only be made for the keys bearing the serial numbers of originally assigned. 3. I agree to return all University keys/key cards to the issuing department's Access Controller immediately upon separation from this department of the University. 4. I will not duplicate or allow anyone to duplicate a University key or card key. NOTE: CALIFORNIA LAW MAKES IT A MISDEMEANOR TO KNOWINLY DUPLICATE OR POSSESS WITHOUT AUTHORIZTION A UNIVERSITY KEY, WHICH ACT IS PUNISHABLE BY FINE OR BOTH FINE AND JAIL CONFINEMENT (PENAL CODE SECTION 469). LN2 Users: 5. I have received training for the following by my group Safety Warden: Cryogen safety, LN2 dispensing system training and proper loading dock door usage. (Safety Warden signature required) Applicant's Signature					
PI's Authorization Signature			Date	Date	
LN2 Safety Trainer's Signature			Date	Date	
CARD ACTIVATION-TO BE FILLED OUT BY KEY CONTROLLER					
Card Activation Date	Initials	Card Deactivation/Expir	ration Date	Initials	

*Actual activation date may take up to 5 days after submission to UCPD. $\ensuremath{\mathsf{Rev}}\xspace\,07/07/2014$

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