

# PI Chemistry Stockroom Account Request

(Please Print Clearly) See Page Two for Directions and Rules

## A) Principle Investigator Information:

_____	_____	_____
Last Name	First Name	
_____	_____	_____
E-Mail (must be an @buffalo.edu account)	Phone #	UB ID #
_____	_____	_____
Department	Building	Room #

## B) Billing Information:

\_\_\_ Please send my monthly bill to the address listed above.

\_\_\_ Please send my monthly bill to the following person:

_____	_____	_____
Last Name	First Name	
_____	_____	_____
E-Mail (must be an @buffalo.edu account)	Phone #	UB ID #
_____	_____	_____
Department	Building	Room #

**C) Notice:** By signing below you are acknowledging that you will be financially responsible for all materials received from the Chemistry Stockroom by you, or your designees, within 30 days of being invoiced. If you do not make payments in a timely fashion, your account may be suspended until it is brought current. Furthermore, all items that are received by you or your designees will only be used for authorized purposes at the University at Buffalo. All materials will be stored, handled, and disposed of in accordance with all University, Local, State, and Federal rules/regulations/guidelines. Usage of the Chemistry Stockroom is a privilege, which may be revoked for failure to comply with all applicable rules and regulations.

\_\_\_\_\_  
PI SIGNATURE

\_\_\_\_\_  
DATE

## D) DEPARTMENTAL VERIFICATION (To be completed by Requestor's Department, such as Chair, ATC, HR, etc.)

The above information has been reviewed and found to be correct by the following in \_\_\_\_\_  
Department

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please send the completed forms to: **Stephen V. Puszta** 359 Natural Sciences Complex

### For Stockroom Use Only

\_\_\_\_\_  
Approved by Stockroom Manager

\_\_\_\_\_  
Date

Cards received by: \_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

## Directions for PI Stockroom Account Request Form

Please be sure to print clearly. Forms which are not legible will not be processed.

This form is for Departments or Principle Investigators to request a Chemistry Stockroom account.

**Departments:** The Chief of Staff, Assistant to the Chair, or other top staff title in a Department may request an account with the Chemistry Stockroom so that they, or their support staff, may purchase items for use by their general Department and courses. This account should not be used to purchase items for a Principle Investigator, as they should request their own account.

**Principle Investigator:** A principle investigator is a faculty member of the University at Buffalo who operates a research group.

If you are working for a Principle Investigator, you should use the Chemistry Stockroom Designee Request form.

### Section A:

Please fill in your Last Name, First Name, UB email address, your office phone number, your UB ID #, your Department, The campus building where your office is located, and your office room number in the appropriately labeled spots.

### Section B:

If you handle processing your own bills, please check the first line, which will have your monthly bill mailed to your office. If your Department has a financial person that handles paying your bills, please mark the second line and provide the Last Name, First Name, UB email address, office phone number, UB ID #, Department, building for their office, and their office room number in the appropriately labeled spots. Your monthly bill will be sent to them, instead of you.

### Section C:

Your signature is required in this spot to indicate that you have read and understood that your monthly bill is due within 30 days of receipt. Any account that is more than 90 days behind may be suspended until such time as all back payments have cleared. You are also acknowledging that all materials purchased through the Chemistry Stockroom are for use in authorized purposes here at the University at Buffalo. They will not be taken off campus or used for any other purpose. Finally, you are agreeing that all items will be stored, handled, and disposed of in accordance with all University, Local, State, and Federal rules/ regulations/ guidelines. Failure to comply with said rules/ regulations/ guidelines may result in the revocation of your stockroom account.

### Section D:

This section is to be completed by the requestor's Departmental office. This is verification by the host department that the information being provided is correct and that the requestor should be authorized to have access to material available through the Chemistry Stockroom. This should be completed by the requestor's Office of the Chair, Assistant to the Chair, Chief of Staff, Human Resource Manager, or other senior staff member.

Should you have any questions regarding this form, please contact the Chemistry Stockroom Manager (Contact information below)

**Please send the completed forms to the Chemistry Stockroom Manger** (contact information below):

Stephen V. Pusztay 359 Natural Sciences Complex  
Telephone: (716) 645-2284  
Email: pusztay@buffalo.edu