



University of North Texas
VIVARIUM FACILITY INTAKE FORM

LAF USE ONLY
PROTOCOL: _____
APPROVAL: _____
EXPIRATION: _____

*This form must be completed and approved by LAF Management prior to ordering animals or gaining access to the Vivarium.
Animal Orders will not be approved without a UNT IACUC approved Animal Use Protocol*

PRINCIPAL INVESTIGATOR INFORMATION:

PI NAME: _____

PI EUID (i.e. abc0000): _____ IACUC PROTOCOL #: _____

PI E-MAIL: _____ PHONE #: _____

PI DEPARTMENT: _____ OFFICE: _____

PI SIGNATURE: _____ TODAY'S DATE: _____

PAYMENT INFORMATION:

PRIMARY FUNDING CHARTSTRING (SPONSORED PROJECT, IDC, etc.)

PRIMARY FUNDING EXPIRATION DATE: _____

ORG DEPT	FUND CAT	FUND	FUNCTION	PC BUS UNIT	PROJECT ID#	ACTIVITY	PROGRAM	PURPOSE	SITE

SECONDARY FUNDING CHARTSTRING (Required if primary funding source is a Sponsored Project):

SECONDARY FUNDING EXPIRATION DATE: _____

ORG DEPT	FUND CAT	FUND	FUNCTION	PC BUS UNIT	PROJECT ID#	ACTIVITY	PROGRAM	PURPOSE	SITE

I authorize the UNT Vivarium Facility to post the monthly usage charges to my project/chart string. I will review the posted charges and initiate a cost transfer if appropriate.

PRIMARY CHARTSTRING AUTHORIZER'S NAME: _____

PRIMARY CHARTSTRING AUTHORIZER'S SIGNATURE: _____ DATE: _____

SECONDARY CHARTSTRING AUTHORIZER'S NAME: _____

SECONDARY CHARTSTRING AUTHORIZER'S SIGNATURE: _____ DATE: _____

COLLEGE RESEARCH OFFICER APPROVAL:

Any Vivarium expenses charged to a **SPONSORED GRANT PROJECT** must have College Research Officer authorization.

CRO APPROVER NAME: _____

CRO APPROVER SIGNATURE: _____ DATE: _____

Email the completed and signed form to Autumn Pinckard at autumn.pinckard@unt.edu.