



Equipment Access Request Form

Full Name: _____ Staff/Student Number: _____

University/Company Email: _____ Contact Number: _____

Department/Affiliation: _____ Supervisor: _____

Please select the equipment you would like to access. Submit this form to the staff-in-charge.

- | | |
|---|---|
| <input type="checkbox"/> ThermoFisher Krios G4 300 kV Cryo-TEM System ^{b,c} | <input type="checkbox"/> ThermoFisher Glacios 200 kV Cryo-TEM System ^{b,c} |
| <input type="checkbox"/> ThermoFisher Talos L120C 120 kV TEM System ^{b,c,r} | <input type="checkbox"/> ThermoFisher Aquilos 2 Cryo-FIB System ^{b,c} |
| <input type="checkbox"/> ThermoFisher Vitrobot Plunge Freezing Systems ^{b,c,r,note2,3} | <input type="checkbox"/> Cressington 208C Carbon Coater ^{b,c,r,note2,3} |
| <input type="checkbox"/> PELCO easiGlow Glow Discharge Cleaning System ^{b,c,r,note2,3} | <input type="checkbox"/> Sample Preparation Room ^{b,c,r,note2,3} |

Sample type: Protein Bacteria Viruses Mammalian cells Other: **Please specify**

Biosafety Level: BSL-1 BSL-2 BSL-3 or above Unknown

Potential Hazard(s): Nil Radioactive Infectious/clinical Other: **Please specify**

Please provide additional information about the sample, e.g., size and characteristics (optional):

Important notes:

1. Safety test requirements: *b* = biological safety; *c* = chemical safety; *l* = laser safety; *r* = radiation safety (radioactive substances).
2. Users accessing CF006c are required to register as a Radiation Worker with the Radiation Board of the Department of Health of Hong Kong.
3. Users accessing CF006c must maintain a valid registration as a Radiation Worker (including but not limited to by submitting the required documents to the HSO and attending a medical examination annually). Otherwise access to the room and equipment will be revoked without prior notice.
4. Training on the use of equipment at the Cryo-EM Centre must be conducted by ULS staff. Depending on the nature and complexity of the procedure or equipment, certain equipment may only be operated by or in the presence of ULS staff.
5. Users must follow the instructions given by ULS staff on the operation of the equipment. The Supervisor is liable for the costs of repairing and/or replacing equipment damaged as a result of misuse by the User.
6. Unauthorised reconfiguration, removal and/or relocation of any hardware or software are strictly forbidden.
7. Any abnormalities of equipment shall be reported to ULS staff at once.
8. Data stored in the Cryo-EM Data Server will be deleted automatically after 90 days. It is the responsibility of the User to backup the data to avoid any data loss. The ULS will in no circumstances entertain any claims for data loss or request for data recovery after the 90-day period
9. The User and Supervisor shall also abide by the [ULS General User Policy](#).

Signature by User:

Signature by Supervisor:

Date: / /

Date: / /

For Official Use

Safety Test/License Check: Biological Chemical Laser Radiation (RS) Radiation worker

Room Access Granted: CF006 CF006a CF006b CF006c CF006d CF006e **Date:** / /