



**Request Form for Working in the BPP**

This form should be filled out to provide essential information about the work/activities to be conducted within the BPP for safety, scheduling, and coordination of workflow. The information provided should help in identifying potential hazards and the training required to complete the work/activities safely. Please fill out all the applicable sections to the best of your knowledge.

**Section 1: Contact Information**

Principal user:

Name: \_\_\_\_\_

NSID: \_\_\_\_\_

Email: \_\_\_\_\_

Key Fob: \_\_\_\_\_

Account or fund number for usage charges: \_\_\_\_\_

(You should ask your supervisor for this number)

Co-workers:

Name: \_\_\_\_\_

NSID: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

NSID: \_\_\_\_\_

Email: \_\_\_\_\_

**Section 2: Description of the work/activities**

Briefly describe the work you will conduct within the BPP (any significant deviation from the original description and experimental conditions, requires BPP coordinator's approval):

(For example: Drying of Fava bean isolate using spray drying at 120° C)



List BPP equipment required and indicate if you have received training from the BPP coordinator on operating the equipment:

Provide details on hazardous materials to be used and quantity (users are responsible for obtaining and providing SDS information for all materials used in the project).

- Chemicals (liquids or solids):

- Flammables with their flash point:

- Compressed gases:

Potential hazards during the project work and subsequent preventive measures:



Required personal protective equipment (PPE):

Additional notes:

Expected starting date: \_\_\_\_\_

Expected completion date: \_\_\_\_\_

\_\_\_\_\_  
Principal user's signature

Date: \_\_\_\_\_

\_\_\_\_\_  
BPP Coordinator's signature

Date: \_\_\_\_\_