

Rice University  
Shared Equipment Authority  
Fee For Service Application-For Profit

Lisa Biswal  
SEA Chair

Shared Equipment Authority Facility

**Entity Name:** \_\_\_\_\_  
**Billing Address:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
\_\_\_\_\_ **Fax #:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Billing contact name:** \_\_\_\_\_  
**Billing contact email:** \_\_\_\_\_  
**PO #:** \_\_\_\_\_

**If instrument is to be operated by a Rice Shared Equipment Authority Research Scientist, technician or other trained user, please complete the below statement.**

Rice University SEA Research Scientist or Technician or other qualified SEA user will be operating the following instrument(s):

\_\_\_\_\_

on behalf of \_\_\_\_\_ who is employed by \_\_\_\_\_ (Entity name).

I understand that if a SEA Research Scientist or technician operates the instrument, there will be an additional fee for the technician's time plus the external instrumentation fee that is associated with operating the equipment. (The amount will be determined by Technician operating the instrument based upon an estimate of the sample prep and time spent on the work and will be communicated prior to work being done. In the absence of an estimate, \$120/hr will be charged.)

***By signing this form, User and User's Employer acknowledge that you understand that payment is due upon demand. Any billing questions may be directed to Meri Dix, Rice University, Shared Equipment Authority, 6100 Main Street- MS680, Houston TX 77005, 713-348-8233.***

**Signature:** \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

