



Project Request Form

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Project Requirements:

- Detailed Project Information, Approved Drawings/CAD Definition, Compensation & Materials (some may be available in shop)

Project Information:

Project Name: _____ Request Date: _____ Requested Due Date: _____

Project Description: _____

Billing Information:

Customer Name: _____ P.I. (or) Advisor: _____ Phone No.: _____
 WSU Dept.: _____ **Account Codes -** FUND: _____ ORG: _____

Shop Estimate/Quote:

Hours: _____ Materials: \$ _____ Cost Estimate: \$ _____ (or) Firm Quote: \$ _____ Completion Date: _____

WSU P.I. (or) Advisor Approval:

Signature: _____ Date: _____

Research Machine Shop (RMS) - Project Summary:

RMS Staff: _____ Labor Hours: _____ Completion Date: _____
Costs - Project: \$ _____ Labor: \$ _____ Components: \$ _____ Materials: \$ _____ **Total Cost:** \$ _____

Customer Acceptance - Project Accepted by:

Signature: _____ Date: _____