**ChemStores Order Authorization Form**

**Fill out this form & email it to ChemStores (****cstores@uwaterloo.ca****) and CC your Supervisor/PI. Be sure to complete ALL requested information and details.**

**RECEIVING ORDER (Select one):**

[ ]  **Pickup at ESC 109**

 **You will be emailed once your order is ready. Pick up during normal store hours.**

[ ]  **Ship order (if applicable) Building:**

[ ]  **sending box back to us Room:**

**BILLING INFORMATION:**

|  |  |
| --- | --- |
| **Date order placed:** |  |
| **Requestor Name (print):** |  |
| **Department:**  |  |
| **Lab/Supervisor’s name (print):**  |  |
| **Account number (18 digit):**  |  **60490 XXXXX-XXXXX XXX** |
| **Authorized (supervisor) signature:** |  |

[ ]  **Check if you would like a receipt for your order.**

**ITEM LIST:**

|  |  |  |
| --- | --- | --- |
| **ChemStores** [**product code**](https://uwaterloo.ca/chemstores/stock) | **Description** | **Quantity** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

[ ]  **Check if providing bottles for solvent refills. List bottle count x 2L/4L in quantity.**