Laboratory Closeout/Relocation Notice

Complete and send this notice as soon as move is indicated; no less than 30 days prior to departure. **Send completed form via fax (304-293-4529) or mail to PO Box 9006.** Once the notice is received, an RSD representative will contact the laboratory with instructions for proper closeout.

P.I./A.R.U.: __________________________________________

Department: __________________________________________

Building: __________________________________________

Room(s): __________________________________________

Lab Coordinator: __________________________________________

Phone: __________________________________________

Box #: __________________________________________

Contact: __________________________________________

E-mail: __________________________________________

Please check one of the following:

☐ Permanent Lab Closeout  ☐ Laboratory Relocation

Date Form Submitted: _________________________________

Anticipated Date of Move: _______________________________