

Division of Biology & Medicine  
**PRELIMINARY INFORMATION FORM**  
 For Potential Facilities Use Research Agreement (this is not the contract)  
**Complete and forward to BM Finance & Planning Box G-R**

<b>PARTIES TO THE AGREEMENT</b>		
Brown Initiating Department/Center:	Outside Party to Agreement:	
Brown Contact Person (PI):	Outside Party's Contact Person:	
Campus Address:	Mailing Address:	
Phone Number: Fax Number: E-mail:	Phone Number: Fax Number: E-mail:	
Is the Outside Party: A Brown employee? A near relative of a Brown employee? Business owned or controlled by a Brown employee or by a near relative of a Brown employee?      Yes _____ No _____		
<b>EXPLANATION AND JUSTIFICATION</b>		
Building: _____ Facility/Lab Room Number: _____ Instrument: _____ Approximate Square Footage of Space: _____	<b>DO NOT WRITE IN THIS BLOCK</b> Base Rate: _____ _____	
Describe how this agreement will benefit the University or relate to the University's mission of teaching, research, and public service:		
<b>TERM AND FINANCIAL INFORMATION</b>		
Period of Proposed Agreement: ___ New ___ Renewal ___ Amendment From: _____ To: _____	Will generate:                  Revenue ___                  Expense ___ Total Estimated Amount \$: _____	
If agreement will generate revenue, indicate the proposed usage of the income: Expense Type: _____ Account # (cannot be a grant): _____		
If agreement will entail University expense, indicate the source to be charged: Account # (cannot be a grant): _____		
<b>OTHER INFORMATION</b>		
Please attach a list of terms and conditions to be included, if available.		
<b>APPROVALS</b>		
Chair/Director:  Name: _____ Title: _____  Signature: _____  Date: _____	Budget Approval: *  Name: _____ Title: _____  Signature: _____  Date: _____  <span style="font-size: small;">*BM Finance &amp; Planning</span>	Senior Administrator: **  Name: _____ Title: _____  Signature: _____ Date: _____  <span style="font-size: x-small;">**Programmatic Review Official (Dean, Executive Dean)</span>