

# UNIVERSITY STARTUP REQUEST FOR SPACE

This Request provides the University of Arizona with the necessary information to document, obtain approvals, and process the request for rental of space and equipment. Please note, the University will not permit the startup to use space that is also assigned to the PI. There must be a clear separation between University functions and that of the startup. This holds true for the request for equipment rented. Please contact University core facilities to discuss the rental of any research equipment requested at <https://research.arizona.edu/facilities/search>.

Completed University Startup Space Request forms should be forwarded to [PDC-StartupRequest@arizona.edu](mailto:PDC-StartupRequest@arizona.edu).

**Submitted By:**

|                           |               |               |
|---------------------------|---------------|---------------|
| <b>Startup Name:</b>      |               | <b>Date:</b>  |
| <b>Requesting Person:</b> | <b>Email:</b> | <b>Phone:</b> |
| <b>Company Address:</b>   |               |               |

**Please describe company activity (do not disclose any proprietary information).**

**If granted University space, will your activities include chemicals or radioactive materials?**

**Yes**     
  **No**     
 If yes, describe the items and their quantities.

**Please list the names of all employees who are also employed by the University.**

**Please list the names of all employees who are not employed by the University.**

**Have all company employees who are also employed by the University completed their Conflict of Interest Disclosures through the Conflict of Interest Office?**

**Yes**     
  **No**     
 If no, please contact the COI Team at [coi@arizona.edu](mailto:coi@arizona.edu), or review information and submit forms at <https://rgw.arizona.edu/compliance/conflict-interest-program>.

**If you have identified specific space, please identify and attach a floor plan that depicts the requested space. If you need assistance from the University to identify space, please check this box,  and describe below the type of research space required.**

**Has your company licensed technology from the University for this venture?**

**Yes**     
  **No**     
 If yes, please provide license information (eg: technology identification)

**Signatures Required by Startup Company:**

|  |              |
|--|--------------|
| <b>Name &amp; Signature of Director/Department Head:</b> | <b>Date:</b> |
| <b>Signature of Dean:</b>                                | <b>Date:</b> |

**For Institutional Use Only:**

**Approved by Research Innovation and Impact (RII)**

|                   |              |
|-------------------|--------------|
| <b>Signature:</b> | <b>Date:</b> |
|-------------------|--------------|

**Approved by Tech Launch Arizona (TLA)**

|                   |              |
|-------------------|--------------|
| <b>Signature:</b> | <b>Date:</b> |
|-------------------|--------------|

**Approved by Conflict of Interest (COI)**

|                   |              |
|-------------------|--------------|
| <b>Signature:</b> | <b>Date:</b> |
|-------------------|--------------|