

OSU Pier Use Form

Last Name		First Name	
Cell Phone		Work Phone	Other #
E-Mail Address			
Employment Agency		Supervisor	
Alternate Contact		Phone #	

Job Title					
<input type="checkbox"/> Scientist	<input type="checkbox"/> Graduate	<input type="checkbox"/> Undergrad	<input type="checkbox"/> Professor	<input type="checkbox"/> Teacher	
<input type="checkbox"/> Observer	<input type="checkbox"/> Technician	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Other: _____		

Use of Pier (Check all that apply)					
<input type="checkbox"/> Physical Oceanography	<input type="checkbox"/> SeaGrant Wet Lab	<input type="checkbox"/> Pollution Assessment	<input type="checkbox"/> Diving		
<input type="checkbox"/> Chemical Oceanography	<input type="checkbox"/> Climate/Meteorology	<input type="checkbox"/> Classes/Sea Safety	<input type="checkbox"/> Tour (Pier/Ship)		
<input type="checkbox"/> Biological Oceanography	<input type="checkbox"/> Geology/Geophysics	<input type="checkbox"/> Training	<input type="checkbox"/> Ocean Engineering		
<input type="checkbox"/> Environmental Ecology	<input type="checkbox"/> Ornithology	<input type="checkbox"/> Equipment Testing	<input type="checkbox"/> Non-Science		
<input type="checkbox"/> Fish Investigation/Survey	<input type="checkbox"/> Visiting Ship	<input type="checkbox"/> Other: _____			

Brief Statement of Use:

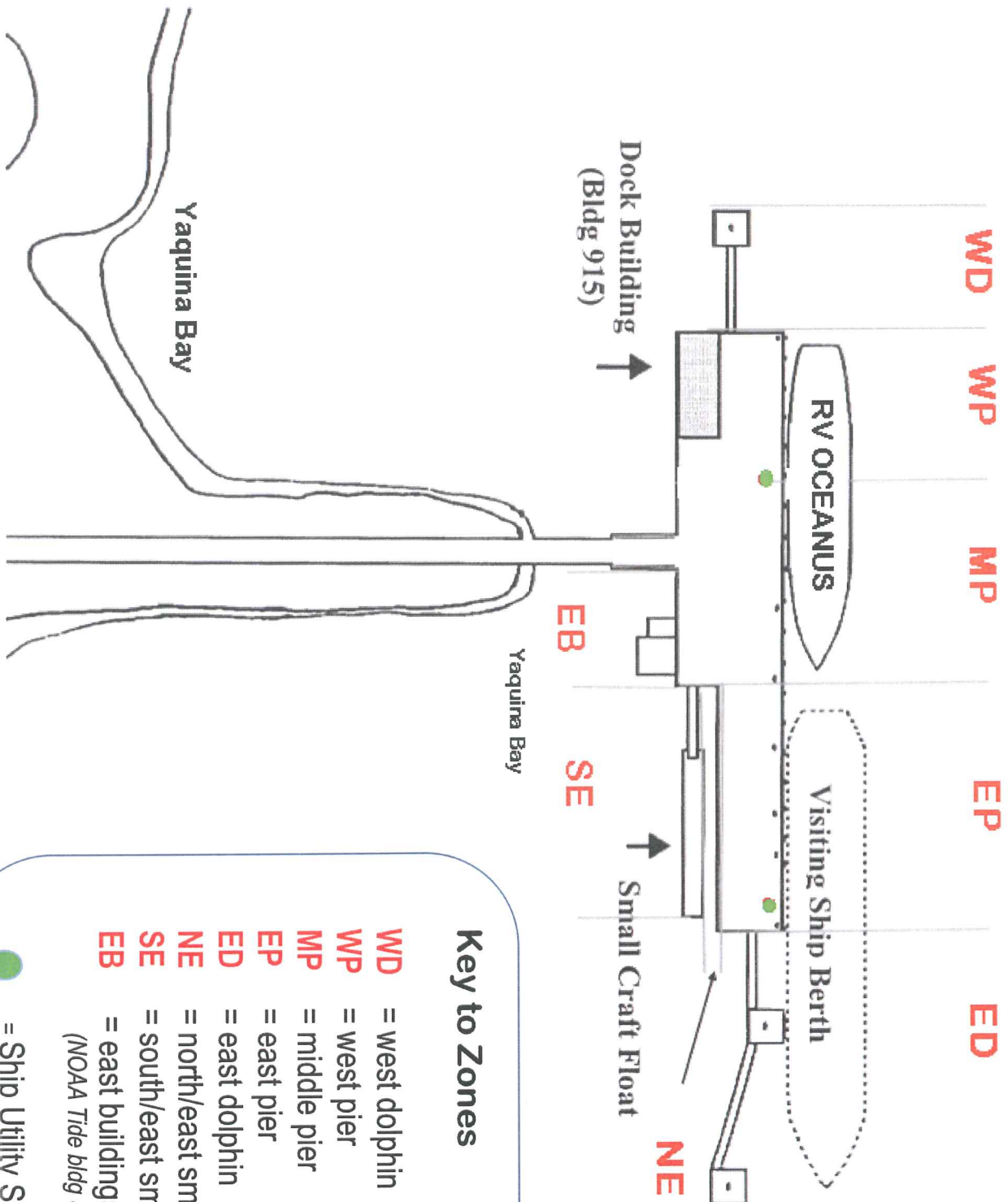
Project Information			
Name of Project			
Funding Agency			
Start Date		End Date	
Approximate number of days Pier will be in use			

Pier Access			
Will you need access to Pier outside of regular business hours (M-F, 9am – 5pm)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Schedule for Access to the Pier:			

Equipment							
Will there be equipment left on the Pier?				<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Briefly Describe Equipment:							
Location of Equipment by Zone (See Map)				<input type="checkbox"/> WD	<input type="checkbox"/> WP	<input type="checkbox"/> EP	<input type="checkbox"/> NE
				<input type="checkbox"/> ED	<input type="checkbox"/> MP	<input type="checkbox"/> EB	<input type="checkbox"/> SE
Date(s) Installed:				Date(s) Scheduled for Removal:			
** Disclaimer: If equipment is not removed by given date(s) Ship Ops may dispose of equipment**							

Office Use Only			
Reference number on Key Card			
Date card was given		Date card was returned	

OSU Ship Operations Equipment Location Zones



Key to Zones

- WD** = west dolphin
- WP** = west pier
- MP** = middle pier
- EP** = east pier
- ED** = east dolphin
- NE** = north/east small craft float
- SE** = south/east small craft float
- EB** = east buildings area
(NOAA Tide bldg & OCA water line bldg)

 = Ship Utility Stations