SPECIMEN REPRODUCTION REQUEST FORM PALEONTOLOGY

Vertebrate Collections
Invertebrate Collections
Paleobotany

11 W Jones St, Raleigh, NC 27601
(919) 707-9800

Request Date: _____________________ Requesting Individual: _____________________

Title: ________________________________

Institution: __________________________ Phone: __________________________

Address: ______________________________

E-mail: ________________________________

Specimens or materials requested: _____________________________________________

____________________________________

Type of reproduction (3D scanning, printing, molding, casting, etc…):

____________________________________

Where will the reproduction be made?: __________________________________________

Will the reproduction alter the specimen in any way? Yes§ / No

§If yes please describe specimen treatment needed for reproduction. Please state specifically any treatment to NCMNS fossil specimens, including embedding procedures, coating required, preservatives applied and or release agents during specimen reproduction. Detail any kind of chemical alteration your procedures might cause, and any and all treatments, including consolidants or coatings (e.g., silicone, latex, mold release agents) that may affect future chemical analyses.

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Are the reproductions solely intended for non-commercial research and/or educational usage? Yes / No†

†Reproductions are licensed by the NCMNS to the researcher named below for non-commercial usage only.
Permission for commercial usage must be requested separately.

How many reproductions are you requesting permission to make?: _________________________________

Detail the specific plans for reproduction usage: ______________________________________________________________________________________

____________________________________________________________________________________

I have read, understand, and agree to the following conditions (please initial by each)

_____ All reproductions including specimen scans, casts, and molds remain copyright of the NCMNS.

_____ Researchers must provide copies of all **3D scans** to the NCMNS before conclusion of an onsite research visit or if reproductions are being made offsite, within 2 weeks of reproducing specimens.

_____ In the **event of molding**, all molds must be returned, along with any notes about materials used (e.g., release agents) with the specimens to NCSM.

_____ Remolding of casts or additional 3D printing of NCSM specimens beyond the scope of this request is prohibited without written permission of NCSM.

_____ Reproductions of NCSM specimens (including printable digital models) may not be distributed to other individuals or institutions (gifted, bartered, or loaned) without written consent of NCSM.

_____ The original NCSM specimen number should be written or embedded directly on casts and molds.

_____ Researcher has read the attached NCMNS policy on specimen reproduction and agrees to abide by all conditions set by NCMNS Paleontology Staff.

Researchers Signature ______________________________________  Date __________________

NCMNS Paleontology staff signatures required for approval:

Lindsay Zanno, Ph.D., Head & Curator, Paleontology, NCMNS

Christian Kammerer, Ph.D., Curator, Paleontology, NCMNS

Sean Moran, Collections Manager, Geology and Paleontology, NCMNS

Additional Conditions of Agreement: ______________________________________________________________________________________

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