

# Test Beam Experiment at DESY II

Beamline 21

Experiment/Group: MBI

Responsible Person(s): Paul Schuetze

Cell phone: ....., while at DESY: .....

## Technical Acceptance (Techn. Abnahme)

Technical Acceptance by Testbeam coordinators \_\_\_\_\_ (Signature)

and optionally by D5 (DESY Safety Group) \_\_\_\_\_ (Signature)

Safety key for Interlock

received: \_\_\_\_\_

returned: \_\_\_\_\_

Assigned Test Period

\_\_\_\_\_  
Signature of the DESY test beam coordinator

A copy of this form must be posted in front of the entrance door of the beam hut.  
-- Mark your equipment and remove it at the end of the test period --