



Architectural Engineering Senior Thesis Owner Permission Form

(Please Print or Type)

Project Name: Atrium Medical Corporation Headquarters and Manufacturing Facility

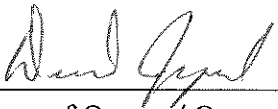
Project Location: Merrimack, New Hampshire

Owner Rep. Name & Title: Atrium Medical Corporation / Dan Joyal

Student Name: Jeffrey James Martin

The undersigned agrees that the student named above has permission to use our building for educational purposes as a model in the Department of Architectural Engineering's Senior Thesis Program including creating academic reports which will be posted and managed on the AE e-Studio / CPEP portfolio site (<http://www.engr.psu.edu/ae/thesis/>). Check one of the following:

- The Student is required to use a generic fictitious name and location.
- There are no restrictions on the use of the actual project name or location.


 Signature of Owner / Owner Representative

7/3/13
 Date

Please return this signed form by mail, fax or email to:

M. Kevin Parfitt, Associate Professor (mkp@psu.edu)
 Department of Architectural Engineering
 The Pennsylvania State University
 104 Engineering Unit A
 University Park, PA 16802
 Fax: 814-863-4789

If you have questions or need any additional information, feel free to contact Professor Parfitt by phone (814-863-3244) or email (mkp@psu.edu)