PRESCRIPTION SAFETY EYEWEAR

LIRR has a new Prescription Safety Eyewear Provider, **3M Company**, to replace the prior US Safety Vendor. If you wish to utilize their services to order prescription eyewear, follow the guidelines below.

WHO TO CONTACT?

For Engineering Department, point of contact to process request:

Anand Seemangal aseeman@lirr.org 718-558-3270

(Send an email with the required information as stated below)

If unavailable, contact:

Roberto Diaz Justin Serina
718-558-3310 OR 718-558-4882
rdiaz@lirr.org jserina@lirr.org

WHAT INFORMATION IS NEEDED?

The following information is required for your request to be processed:

- Employee name & IBM#
- Title & Department
- Phone #
- Lens type desired:
 - Clear & Sunglasses (only available for employees 1st initial order)
 - Clear Only
 - Sunglasses Only
 - Photochromatic ("Transitions")

This information will be used to generate an authorization form(s), which will be emailed back to you.

NEXT STEPS

Once employee has received authorization form, you are then required to obtain **supervisor's approval/sign-off**. The employee will then take this document to the **3M Participating Eyewear Provider** (list will be provided in email) to finish the exam, order selection, order fulfillment, and with a revisit, the final fitting.

(Supervisors can use to gather employee information, and send as attachment to the specified email address) PLEASE PRINT CLEARLY AND LEGIBLY

Employee Name:	
IBM #:	Employee Name:
Job Title:	IBM #:
Department / Discipline:	Job Title:
Telephone #:	Department / Discipline:
Lens Type Desired (select ONE):	Telephone #:
☐ Clear & Sunglasses (only available for 1st initial order)	Lens Type Desired (select ONE):
□ Clear Only	☐ Clear & Sunglasses (only available for 1st initial order)
□ Sunglasses Only	□ Clear Only
□ Photochromatic ("Transitions")	Sunglasses OnlyPhotochromatic ("Transitions")
Employee Name:	
IBM #:	Employee Name:
Job Title:	IBM #:
	Job Title:
Department / Discipline:	Department / Discipline:
Telephone #:	· · · · · · · · · · · · · · · · · · ·
Lens Type Desired (select ONE):	Telephone #:
	Lens Type Desired (select ONE):
□ Clear & Sunglasses (only available for 1st initial order)	Class C. Considerate (substantible for 4 of initial and an)
□ Clear Only	☐ Clear & Sunglasses (only available for 1st initial order)
□ Sunglasses Only	□ Clear Only
□ Photochromatic ("Transitions")	☐ Sunglasses Only☐ Photochromatic ("Transitions")
Employee Name:	
IBM #:	Employee Name:
Job Title:	IBM #:
Department / Discipline:	Job Title:
	Department / Discipline:
Telephone #:	Telephone #:
Lens Type Desired (select ONE):	Lens Type Desired (select ONE):
☐ Clear & Sunglasses (only available for 1st initial order)	20.3 . Jpo Doon on tooloot offer
□ Clear Only	Clear & Sunglasses (only available for 1st initial order)
□ Sunglasses Only	□ Clear Only
□ Photochromatic ("Transitions")	□ Sunglasses Only
	□ Photochromatic ("Transitions")