

NATIONAL INSTITUTE OF TECHNOLOGY CALICUT

DEPARTMENT OF CHEMICAL ENGINEERING

Instrumental Analysis Lab – Requisition Form (External)

REQUEST FORM NO:

Date:

General Instructions

- (a) Please provide all the details on the form clearly and correctly.
- (b) Kindly submit the request forms, test materials, and payment receipt to avoid delays.
- (c) Free slot may be booked in advance.
- (d) Timings: 9:00 am — 5:30 pm on all working days.
- (e) Pen drive is not allowed.

1. Client Address

Name:	Address:
Designation:	Pin code:
Reg no:	Tel:
Organization:	Mob:
	Email:

2. Special instruction if any

3. Kindly perform the following tests

Name of instrument:	No. of samples:

4. Declared that the test material is:

Not hazardous Non-radioactive Non-infectious

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5. I/We have understood the terms and conditions of the test and agree with the test method and procedure of the institute. I/We hereby request that test may be carried out on the test material submitted. Declared that the information provided about the test material is true to the best of my/our knowledge.

Name:

Signature:

Name and signature of Guide:

FOR OFFICE USE ONLY

Amount to Be Paid At The Accounts Section, NITC		Signature of Staff In-Charge
Date		Signature of Faculty In-Charge