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Rheology Facility Anton PaarMCR 102



Requisition Form

Supervisor: Date:

Advanced Materials Research Centre (AMRC), Kamand Campus Indian Institute of Technology Mandi, Himachal Pradesh-175075 Email: amrcoffice@iitmandi.ac.in

User Information

Name of Institute/University:_____

Contact no & E-mail Id:

Billing Address	S:					
User From: IIT Ma	andi (<u> </u>)	Academic	from Himac	hal-Pradesh (_	_)	
Academic from outside Himachal-Pradesh () Industrial User (_					_)	
Samples Details & Payment Details						
No. of Samples:	Transact	tion id:		Amount Rs.:		
Sample Type:	Liquid () Gel ()	Paste ()		
Analysis Details Analysis Required: VISCOMETRY MODE () OSCILLATION MODE ()						
S.No	Sample ID		Sample con	nposition		
1						
2						
3						
4						
5						
6						
7						
8						
9						

Undertaking:

I,	the undersigned hereby declare that the
samples being suppli	ed for analysis are for academic and/or research and
development purpos	e only and the results of the analysis will not be used for settling
any legal issues.	

Signature of research scholar/indenter Signature of the Supervisor

(with stamp)

Name

Designation

Terms and Conditions:

- ❖ Analysis on samples will be done only after receiving the analytical charges and complete details of analysis.
- External users will not be allowed to handle instruments under any circumstances.
- ❖ IIT Mandi reserves the right to return the samples without performing the analysis and refund the analytical charges under special circumstances.
- ❖ If user want to get the original receipt or samples back then they have to send the envelop with fixed the post ticket.

Address for Correspondence:

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