INDIAN INSTITUTE OF TECHNOLOGY, BOMBAY

Department of Chemistry

ANALYSIS REQUEST FORM AND SAFETY DATA SHEET - 400 MHz SOLID-STATE NMR

Name of the user: Email Contact No: Name of the Institute/Organization: Address:	Name of Guide/PI: Email: Contact No.

User Type: IITB / External (University/National Lab/R&D/Industry

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1. Sample Information:

- **Sample Code/Name**: _____
- **Number of Samples**: _____

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2. Details of Analysis Required:

a) Solid-State 1D NMR *(^{1}H NMR is not possible in solid-state mode)*

- Nuclei of Interest *(e.g., ^{13}C, ^{31}P, ^{29}Si, etc.)*: _____
- Required Spectral Range (ppm): _____
- Minimum Sample Requirement: 100-200 mg of finely powdered material.

b) Special Experiments (if required):

- Variable Temperature Experiments (Specify Temp.):
  _____

  _____

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3. Sample Characteristics:

- **Moisture Content**: Present / Absent / Not Applicable
- **Sample Type**: Organic / Inorganic / Magnetic / Non-Magnetic / Other (Specify): _____
- **Physical Properties**: Carcinogenic *(Specify Level: _____)* / Non-Carcinogenic / Radioactive / Explosive / Toxic / Corrosive / Flammable / Non-Flammable / Other *(Specify: _____)*
- **Stability**: Stable at Room Temperature / Hygroscopic / Sublimes / Reactive to Air / Moisture / Light / Heat
- **Toxicity Level**: Non-Toxic / Mildly Toxic / Highly Toxic

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4. Health and Safety Information:

- **Potential Hazards**: Yes / No *(If Yes, specify: Irritant to Skin / Eyes / Harmful to Skin / Toxic if Inhaled / Ingested)*
- **Precautions for Handling**: _____
- **Symptoms of Exposure**: Difficulty in Breathing / Skin Reddening / Eye Irritation / Vomiting / Dizziness / Headache / Unconsciousness / Other *(Specify: _____)*
- **First Aid Measures**: _____
- **Sample Disposal Method**: _____

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5. Sample Handling Policy:

- All samples must be properly labelled with hazard classification.
- Samples will be **discarded within 7 days** of analysis.
- Users must arrange for sample collection if required, as the **NMR lab will not dispatch** samples.

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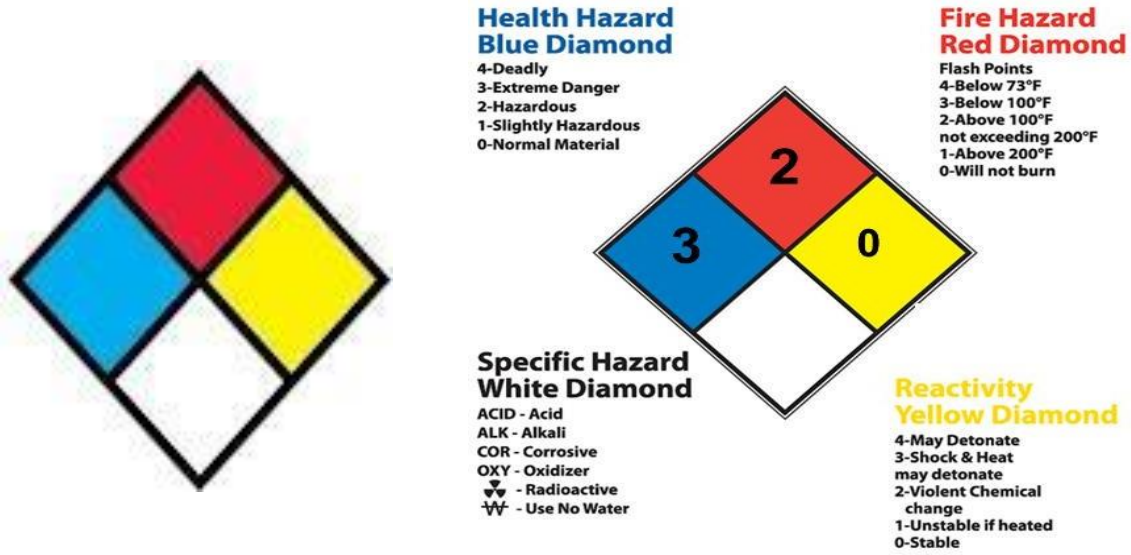
6. Additional Information:

- **NFPA Hazard Diamond (If MSDS Available)**: Fill in the appropriate values.



7. MSDS Declaration:

I certify that the submitted samples are for research purposes only, and the provided information is accurate to the best of my knowledge. I understand that I am responsible for any consequences arising from incorrect information provided in Sections 3 & 4.

I agree to acknowledge **DST and the Department of Chemistry, IIT Bombay**, for providing the **400 MHz Solid-State NMR** facility in any related publications. I will also share publication details (journal name, volume, author names, issue date, etc.) at **choffice@chem.iitb.ac.in**.

I declare that the content of this report is for internal use only and **will not be used for advertisement, evidence, litigation, or certification purposes**.

I accept that **all reports (soft/hard copies) will not bear any official signatures, seals, or stamps** from the Department of Chemistry, IIT Bombay.

Signature of the User

Signature of the In-Charge/HOD/PI with Seal/Stamp

Date: _____