Indian Institute of Technology

Central Facility located in Centre for Research in Nanotechnology and Science (CRNTS)
Two Dimensional Gas Chromatograph with Time of Flight Mass Spectrometer
Requisition Form for using the facility (gcgctofms@iitb.ac.in)

Date:_		
1.	Name of User:	
2.	Name of Organization:	
3.	Address of Organization:	
4.	Name of Head / Principal Investigator:	
5.	Mobile/ Phone No. of User:	
6.	Email address of User:	
7.	Number of Samples/injections:	
8.	Preferred Date for the Slot:	
Sampl	e Information	
(a)	Origin of the sample:	
(b)	Details on Sample Preparation/Processing:	
(c)	What steps have been taken to ensure that samples are free of water:	
(d)	State type of hazard associated with the sample:	
(e)	Analytes of interest & Boiling point:	
(~)	·· J · · · · · · · · · · · · · · · · ·	

(f) Expected concentration range of analytes:				
(g) Solvent:				
(h) Information on columns and temperature programming preferred for the analytes based on Literature:				
(i) Is 2D analysis required*?: Tick as appropriate Yes/No				
(j) Preferred Mode of injection:				
(k) Additional information : (Constraints/Preferences/ etc.):				
Important information:				
Please follow Instructions for submission of external samples and sample preparation guidelines.				
* 2D mode operation is not recommended for simple mix of analytes that can be well resolved through choice of appropriate temperature programming; 2D mode is primarily recommended for complex environmental samples; A 1-D analysis of the sample is required before 2 D analysis can be performed.				
Undertaking				
I understand that the samples will be analyzed according to the choices recorded in the form.				
I declare that adequate steps have been taken to ensure that the samples are free of water (for all injection mode other than twister mode).				
I declare that the samples are non-infectious and non-explosive.				
I have read instructions for external user registration and sample preparation and agree to acknowledge the IRCC Central Facility, Two Dimensional Gas Chromatograph with Time of Flight Mass Spectrometer (GC-GC-TOF-MS) of IIT Bombay in our Publications/Reports/Thesis in which the data is reported with due feedback to gcgctofms@iitb.ac.in .				
Signature:				
Date:				

Place:			
	For IITB use o	only	
Date of sample receipt:			
Date of analysis:			
Name of the Operator:			
Signature of Operator:			
Registration number:			
Remarks:		-	

	ering Letter on Institute / College Original L	.etterhead**
Date:		
To, The Head SAIF, IIT Bombay.		
Sub: (Instrum	ent/facility name) Analysis of Samples	s at SAIF IIT Bombay.
Dear Sir,		
studying/employed at our In	, (Name of the use stitute under the guidance of ment) would like to use the Instrument Fa	(Guide Name)
	Samples) for(name of instruhed herewith for the said analysis.	ument/facility). The Material Safety
name) facility is used(Instrument/fa	of the analysis data / results received in any Publication or Thesis, wacility name) SAIF, IIT Bombay in our Publice.saif@iitb.ac.in	ve agree to acknowledge the
 nature. This report is not a legal to the second of th	gal document per se and is based on the inderstand and accept that this report is independent and may not be used for marketing shall be solely responsible for any intersection and the contents thereof. All warranties or represents are hereby expressly excluded. Sued reports/results (Soft/hard) will not care. Thumber. But if we fail to provide the samout GST No. and request to add GST No.	e samples provided by us. not a certificate for any performance of be construed as a legal document of the products or processes. ended use / utilization of the repor- esentations of any kind pertaining to arry any Signature or Seal and Stamp
The GSTIN Registration No.	of our Institute is	
Thanking You,		
Signature of Guide / Profess Name Designation	sor / Head : : :	Official Seal

Department

^{**} This Covering Letter should be on your Institute's Original Letterhead which should have your Institute complete postal address with state and pin code dully signed and with Institute's official seal. Any Letter with incomplete details and without Institute's official stamp will not be entertained.

Covering Letter on National Lab's Original Letterhead**

To, The Head		Date:
SAIF, IIT Bombay.		
Sub: (Instrume	ent/ Facility name) Analysis of Sar	nples at SAIF IIT Bombay.
Dear Sir,		
studying/employed at our Institut	, (Name of the use the under the guidance of;) would like to use the Instrument Fa	
We have(No. of Samples) f (MSDS) is attached herewith for		ity). The Material Safety Data Sheet
name) facility is used in	any Publication or Thesis, v y name) SAIF, IIT Bombay in our Pu	from the (Instrument/facility we agree to acknowledge the blication and Thesis. We shall submit
 nature. This report is not a legal december of the applicants of the applicant of the	document per se and is based on the restand and accept that this report is y related aspects. This report may not and may not be used for marketing to be solely responsible for any interests thereof. All warranties or represent hereby expressly excluded. reports/results (Soft/hard) will not caumber. But if we fail to provide the second of the second	not a certificate for any performance ot be construed as a legal document.
Thanking You,	a	
Signature of Guide/Professor/Sci Name Designation	ientist/Head : : :	Official Seal

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Covering Letter on Company's Original Letterhead**

Date:	
To, The Head SAIF, IIT Bomb	pay.
Sub:	(Instrument/Facility name) Analysis of Samples at SAIF IIT Bombay.
Dear Sir,	
	alyse(No. of Samples) for(name of instrument/facility). afety Data Sheet (MSDS) is attached herewith for the said analysis.
Further we ack	nowledge & accept that:
scientific This rep We (the performation construction with the report performation of the report performand performand stare) If our Collinvoice /	tents of the report prepared based on the measurement are purely technical action nature. ort is not a legal document per se and is based on the samples provided by us. applicants) understand and accept that this report is not a certificate for any ance / efficacy / efficiency / utility related aspects. This report may not be ed as a legal document, certificate or endorsement and may not be used for no of the products or processes. applicants) shall be solely responsible for any intended use / utilization of the rovided and / or the contents thereof. All warranties or representations of any taining to the report, or its contents are hereby expressly excluded. that all the issued reports/results (Soft/hard) will not carry any Signature or Seamp of SAIF IIT Bombay. ompany has GST Number. But if we fail to provide the same to you, in that case is Bill will be generated without GST No. and request to add GST No. after invoice on will not be entertained by SAIF is acceptable by us.
The GSTIN Re	gistration No. of our Company is
Thanking You,	
Signature Name Designation Department	: Official Seal

^{**} This Covering Letter should be on your Company's Original Letterhead which should have your company complete postal address with state and pin code dully signed and with company's official seal. Any Letter with incomplete details and without company's official stamp will not be entertained.