

# INDIAN INSTITUTE OF TECHNOLOGY, BOMBAY

Centre for Sophisticated Instruments and Facilities (CSIF)-IoE funded

Available via *Indian Science Technology and Engineering facilities (I-STEM)* for external users

Environmental Science and Engineering Department (ESED)

## ANALYSIS REQUEST FORM AND SAFETY DATA SHEET

### OC-EC/Thermal Optical Analyzer Model 5L (Sunset Lab)

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

**Name of the user:**

**Email:**

**Contact No.:**

**Name of the Institute/Organization:**

**Address of Institute /Organization:**

**Name of Guide/ PI:**

**Email of Guide/ PI:**

**Contact No. of Guide/ PI:**

- 1. Number of Samples:**
- 2. Details of Analysis required/ Parameters (Eg: IMPROVE-A/ NIOSH/ EUSAAR-2):**
- 3. Sample Type (NOTE: ONLY QUARTZ FILTERS):**
- 4. Sample Area/dimension (Note: minimum required area is 3 cm<sup>2</sup>):**
- 5. Moisture (Yes/No):**
- 6. Volatile organic compound (Yes/No):**
- 7. Specify the Storage and handling conditions (Room temp/ Refrigeration):**
- 8. Sample Properties (eg: toxicity, stability, decomposition, flammable, carcinogenic, non-hazardous, corrosive, health hazards etc):**
- 9. Additional information if any:**

## **Declaration**

I confirm that the samples submitted for analysis are for research purposes only, and the above furnished details are correct and true to the best of my knowledge. I have read and understood all the terms and conditions, as well as the details of the process and the facility. I understand that I will be held responsible for any damages/accidents/medical issues arising from incorrect and/or incomplete information provided by me against points 1-9.

I agree to acknowledge I-STEM (for external), CSIF-IOE, and IIT Bombay for providing (Instrument name) analytical facility for my research work, in my publication.

I declare that the content of this report is meant for our information only, and we will not use the content of this report for advertisement, evidence, litigation or quote as a certificate to a third party.

Signature of the User

Signature of the In Charge/HOD/PI with College/P.I./Guide  
Seal/stamp

Date:

Place: