

Instrument Booking Charges

Instrument Name:

PIC Name:

Mobile Number:

Email :

Department:

1. Instrument Name:

2. Unit of Services: (e.g. 1, 2, 10)

3. Type:

(e.g. Cubic

Inch/Cycle/Day/Experiment/Hour/Liquid/Liter/Month/Parameter(Sample)/Plate/Reaction/Run
/Sample/Solid)

4) Name of the Experiment:

5) Educational Institution Charges:

6) R & D Laboratory Charges:

7) Industry Charges :

8) International Charges:

9) Internal Charges (Within NIT Rourkela):

10) Condition of Analysis:

(e.g. as per MSDS document and Covering Letter)

11) Status:

(e.g. Functional/Non-Functional)

12) Available for Booking:

13) Remark if Any

Name:

Signature:

Date: