TESTING REQUISITION FORM

High Performance Liquid Chromatography (HPLC)

		FOR OFFICE USE ONLY	
REQUESTED BY		DATE OF SUBMITTION	
ADDRESS		DUE DATE	
ASSIGNMENT UNIT		JOB NUMBER	
SCIENCE OFFICER		E-MEL	

**SAMPLE TYPE: LIQUID/SOLID/POWDER
**AMOUNT OF SAMPLE: Min 1.0 gram
**Standard is needed to perform testing

SAMPLE ID	SAMPLE DESCRIPTIONS	OPERATING CONDITIONS
		Method: Yes/No
		*If yes, please attach
		Column:
		Mobile phase:
		Type of detector other than DAD or RID detector:
		Flow rate: ml/min
		Functional group:

Additional Information :

MAK VALUE ( ) Harmless ( ) Toxic ( ) Combustible ( ) Irritating

Chemical Formula: _____ (if not known,please list compounds @ elements potentially present!)

	For Official Use Only
APPROVED BY :	SUBMITTED BY Initial:_____ Date:_____
DATE :_____	SUBMITTED TO Initial:_____ Date:_____

Note:
*For Internal payment, select:'**TABUNG AKTIVITI NANOCAT**' as a payee. **Account No: J-55024-76160**
*For Non Universiti Malaya,
payment made by crossed cheque of '**BENDAHARI UNIVERSITI MALAYA'** , **CIMB Bank Account No : 80-0127999-8.**