

**INTER UNIVERSITY INSTRUMENTATION CENTER (IUIC)**  
**Mahatma Gandhi University**  
**HPLC ANALYSIS REQUEST FORM**

Name of applicant :

Designation and Address :

Name of the institution :

Name & signature of the Supervisor :

Description of sample	Structure and nature of the compounds

Mobile phase: Methanol  %      Acetonitrile  % : Gradient  / Isocratic   
Water  %, Other (  )  %

UV-Visible Data of the samples :

Number of samples :

Date:

Signature of Applicant:

**For office use**

**Name of Analyst:**

**Permitted by:**

**Signature:**

**Date of Analysis:**

**Consumption of solvents (milli liter)**

Methanol

Acetonitrile

Water

Other (        )

**Consumption of Consumables (Nos)**

Syringe filter

Micropipette tips

**Total fees:**

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**Instructions**

1. The fees for the analysis will be depending on the consumption of the solvents and consumables.
2. The payment is accepted only through Demand Draft.
3. For **HPLC** analysis, *Payments are to be made only money transfer to*

**Bank: State Bank of India**

**Branch: M. G. University Campus Branch**

**Account Name: Equipment Maintenance Fund (EMF-IUIC)**

**Account No: 67212747998**

**IFSC Code: SBIN0070669**

4. **Tariff for Analytical Work**

<b>SI No.</b>	<b>Name of Equipment</b>	<b>For Campus Student</b>	<b>For Researchers outside the Campus from Educational Institution</b>	<b>For Industries</b>
	High Performance Liquid Chromatography (HPLC)	If solvent provide 10; if not ,the solvent cost+10	If solvent provide 200; if not ,the solvent cost+200	If solvent provide 400; if not ,the solvent cost+400

Contact : Cyrus Koshy Mathew (9526967493)