

## **APPLICATION FORM**

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# GC-MS TESTING & ANALYSIS SERVICE

## For Laboratory Use Only

Received date

Ref. no. : GC-MS/B/20\_\_\_/

Quotation no.

Date completed

| APPLICANT INFORMATION         |             |         | SAMPLE INFORMATION |   |                         |                    |           |
|-------------------------------|-------------|---------|--------------------|---|-------------------------|--------------------|-----------|
| NAME :                        |             |         |                    | No. of sample submission:                                       |                         |                    |           |
| ADDRESS :                     |             |         | Ple                | Please ( $\sqrt{\ }$ ) at the relevant box:                     |                         |                    |           |
|                               |             |         |                    | nple handling: Store in free Stench chen vented cabi Others:    | nicals. Store in tight  | seal container kee | ep in air |
| CONTACT NO. :                 |             |         | Ha:<br>C           | Hazardous information: Carcinogenic ☐ Yes ☐ No Toxic ☐ Yes ☐ No |                         |                    |           |
| EMAIL                         | :           |         | 10                 | OXIC  | ☐ Yes                   | □ No               |           |
|                               |             | DET     | AILS OF ANAL       | YSIS  |                         |                    |           |
|                               |             |         |                    |   | Temperature program, °C |                    |           |
|                               | Sample code | Solvent | Mass Rang          | e Ove   |                         | Detector           |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
|                               |             |         |                    |   |                         |                    |           |
| CONFIRMATION OF USING SERVICE |             |         |                    |   |                         |                    |           |
| Applicant signature : Date :  |             |         |                    |   |                         |                    |           |



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FORM

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#### RESEARCH FUND INFORMATION

(1) Service charge as follow. For latest charge please refer to Chemistry Department Central Facility Website: cenfac.um.edu.my

|               | Price (RM)   |  |                       |                            |  |
|---------------|--|--|-----------------------|----------------------------|--|
| GC-MS         | Package A<br>Sample Analysis<br>1 Day<br>(9:00 a.m. – 5:00 p.m.) | Package B<br>Per Slot of 3 hours<br>9.00 a.m. – 12.00 p.m.;<br>2.00 p.m. – 5.00 p.m. | Package C<br>Per year | Package D<br>Per injection |  |
| External user | 400  | 150  | -                     | 80                         |  |

- (2) Payment of service charge and method of payment is described in the quotation that will be provided to the user.
- (3) Invoice will be issued by the Division of Investment, Treasury Department, University of Malaya for the purpose of claiming payment for services that have been offered.
- (4) Results of analysis will be available for collection only after the Department of Chemistry has received any document that proved the payment has been made.

| I hereby agree to make the payment in accordance to the quotation issued by the Department of Chemistry, Fa | culty of Science, |
|---|-------------------|
| University of Malaya, Kuala Lumpur  |                   |

DATE :

AUTHORISED PERSONNEL & : COMPANY OFFICIAL STAMP

COMPANY REGISTRATION NO : GST ID :

#### **IMPORTANT INFORMATION**

- 1. Sample must not contain water
- 2. For Mass Spec please refer to technical specification as stated in Cenfac website
- 3. User(s) are required to retrieve all the samples after analysis

For any queries please contact:

| Resource person           | Name               | Phone        | Email               |
|---------------------------|--------------------|--------------|---------------------|
| Assistant Science Officer | Hashim Mohd Salleh | 03-7967 4251 | hashims@um.edu.my   |
| Senior Science Officer    | Norzalida Zakaria  | 03-7967 4245 | norzalida@um.edu.my |

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