 Department of Chemical and Biochemical Engineering

**Indian Institute of Technology Patna**

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**Common Requisition form for BET-TPDRO Facility**

1. USER and PAYMENT DETAILS

|  |  |
| --- | --- |
| Name:Department:Contact No:e-mail ID: | **Estimated analytical charges:**(See the basic charges mentioned at the end of this form. Also, please see the terms and conditions, to know about any additional charges) |

1. EXPERIMENTAL DETAILS REQUIRED

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| --- |
| Name of the facility required:Characterization Required: PHYSISORPTION/CHEMISORPTIONOutgassing condition(duration/temperature):Service requested for TPDRO: CO2 TPD/ NH3 TPD/ H2 TPR/O2 TPOFacility and Experiment specific details for TPDRO:Experimental Conditions: (Temp range/ramp/hold time)Target Temperature:Pretreatment conditions (Temp/duration/gas/gas flow rate): Reactive gas adsorption (Temp/duration/gas/gas flow rate):Any other details:  |

1. SAMPLE DETAILS

|  |  |
| --- | --- |
| **No of Sample with sample ID (s):** |  |
| **Nature of sample** | Sample Name: Type of sample: Only powder sampleSample source: Natural/Synthetic/WasteChemical Nature: Organic/Inorganic/Organic-Inorganic/Carbon based)Nature of sample: micropore/mesopore:Amount of sample required: Mesopore- 200-300mg Micropore- 120-150mg, TPD/TPR/TPO- 100mgPl. specify if sample is Toxic/Hazardous/Explosive/Etc: Is your sample containing any hygroscopic nature: Any other sample info relevant to Facility/Experiment:  |

Signature of the user

 Name & Signature of the Supervisor

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| --- |
| 1. **Payment from Department operating grant**: An amount of Rs ………. is sanctioned as the analytical charge towards the measurement with…………. The said amount may be transferred on ledger from department of ……………………. to department of Chemical and Biochemical Engineering.
2. **Payment from R&D project:** An amount of Rs ………. is sanctioned as the analytical charge towards the measurement with ………………. The said amount may be transferred on ledger from the project ……….……….to ledger of analytical charges in DDF of department of Chemical and Biochemical Engineering at R&D, IIT Patna
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Signature of HoD, user department/Dean, R&D/ Manager/Division Leader

**Terms and Conditions for using the Facilities**

1. The mentioned charges are **excluding any applicable GST.**
2. Samples should be ready to use for/in/with the instrument used in the experiment.
3. The charges mentioned are only for measurement and providing the raw data (in the format possible with the instrument) thereafter. No analysis/software compatibility of data can be claimed later. For consultancy on data analysis, the user may contact the experts separately through head of the department.
4. Measurements are subject to the corresponding instrument being in working condition. The status of each instrumental facility will be updated regularly.
5. In case of the measurement remains incomplete due to malfunctioning or any unforeseen situation, the user will be notified. Depending upon user’s discretion, either the payment received will be returned or the measurement will be carried out after the instrument becomes functional (maximum waiting period also may be informed by user).
6. Analytical Charges:

**Details of Analytical charges to be paid for using experimental facilities**

|  |  |  |
| --- | --- | --- |
| Sl. no. | Name of the facility | Charges (in INR, per sample) |
| IIT Patna users | Users from external academic institutes | Users from Industries/R & D laboratories |
|  | BET Surface area analyzer  | 1500 | 3000 | 5500 |
|  | TPD/TPR/TPO | 2500 | 5000 | 7000 |

1. Payment : Demand Draft only
2. The DD can be in favour of **“Registrar, IIT Patna”**, payable at ‘IIT Patna’.
3. Filled in requisition form along with payment confirmation details **should be sent along with the sample to the address given below.
The Head, Department of Chemical and Biochemical Engineering
# 104/06, IIT Patna
Amhara Road, Bihta
Patna-801106**
4. It is recommended that the user gets the confirmation through e-mail about the sample compatibility as well as the instrument working status etc., before sending any sample/payment.
5. Contact Details:
Email: krishnajee@iitp.ac.in
Phone: 0612 302 8279

FOR OFFICE USE ONLY

SLOT ALLOTMENT DETAILS

Date of submission of form:

Job Order Number:

Assigned date and time of execution: No. of slots allotted:

Signature of staff operator/in-charge

Signature of Faculty in-charge