

## National Institute of Technology Silchar Department of Mechanical Engineering

## Advanced Engine Research Laboratory/ Fuel Research Laboratory

## **Requisition Form**

Name of User	:				
Designation	:				
Organization/ Institute	:				
Department					
Address for Communication	:				
Email ID	:				
Contact Number	:				
Required of Instrument		0	CRDI engine	0	Centrifuge
(Tick the instrument)		0	Multi fuel analyzer Bomb Calorimeter	0	Hot air oven
		0	Pyrolysis Reactor	0	Magnetic stirrer Alcohol Meter
Sample details:	:				
(Toxicity, Skin irritation, Highly					
volatile, etc.)					
Input Parameters	:				
Sample name/number (if any)	:				
Number of samples	:				
(Maximum 03 numbers)					
·					

Certify that the samples are belongs to the user mentioned above and the results will be used only for academic and research purpose.

Signature of User with date

Signature with date and seal (Supervisor/Faculty member/HoD)

Date of allotment	:
Remarks, if any	:
Signature of Laboratory In-Charge	: