



**INTER UNIVERSITY INSTRUMENTATION CENTER  
(IUIC)  
Mahatma Gandhi University**



**REQUEST FOR GC-MS ANALYSIS**

Name of the Applicant :

Designation and institutional address :

Phone No. & E-mail :

Name and Signature of the Supervisor :

**DESCRIPTION OF SAMPLE**

Nature of sample :

Soluble in (specify the solvent) :

Details of target compounds (Specify if known) :

Mass Range : 45 –

Ionization mode (check appropriate box) : Positive  Negative

Column Specifications :

**Column Oven program (Furnish the details below if the temperature program is known for the analytes) :**

**For office Use**

Date :

Permitted by:

Signature of Analyst:

**Tariff for Analytical Work**

SI No.	Name of Equipment	Charges in (Rs)		
		MG University Campus users	For Researchers outside the Campus from Educational Institution	For Industries
1	GC-MS	250	900	2000

**Instructions**

1. For the analysis, *Payments are to be made only through 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**

2. *If the payment received is more than the actual analyses charges incurred, it will not be possible to refund the excess amount paid. However, the excess amount may be adjusted against future analyses by the same user or another user from the same organization following a written request by Email or hard copy.*