

## **CENTRAL UNIVERSITY OF JAMMU** CENTRAL INSTRUMENTATION FACILITY Rahya Suchani Bagla Samba-181143, J&K, India

## **REOUISITION FORM FOR BOX FURNACE (upto 1000 °C)**

Email: head.<u>cif@cujammu.ac.in</u>; <u>office.cif@cujammu.ac.in</u> (Payment should be credit in: Central Instrumentation Facility, CUJ A/c No. 0902040520000032 IFSC:JAKA0RAHYAA)

User Information				
User Type (Please tick as applicable)	:	Central University of Jammu other Educational   Institutions R&D Labs Industries		
Name:	:			
Designation:	:			
Supervisor Name/PI	:			
Research Area	:			
Department & University /	:			
Institution/College				
Billing Name & Address	:			
Phone/ Mobile Number	:			
E-mail Address	:			

## **Sample Details**

No. of Samples* Sample ID* Temperature* Time*	: : :			
Sample Type     Payment Details     Amount   paid:	Draft No/ Transaction ID	Dated:		
<b>Recommendation from Head of Department</b> The above samples may be accepted on the behalf of our department/ Institution				
Signature of user	Supervisor's Signa	ature Signature of Head of Department With official Seal		
Signature of Lab Incha	rge			
	For offic	ice use only		

Payment received vides receipt no. ......DD/cash......Dated.....Amount: .....

Job No. / Ref No.