

PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU)

| UIRL/F/91 |
|-----------------|
| 1/2025 |
| 08/01/2025 |
| CD SPECTROMETER |
| UIRL/ |
| 1 of 2 |
| |

MASS SPECTROMETRY LABORATORY SAMPLE SUBMISSION FORM (INDUSTRY)

General Rules and Requirements:

| 1. | All information provided should be true. | | | | | | | | | |
|-----|---|---|--|--|--|--|--|--|--|--|
| 2. | Sample submission procedure. | | | | | | | | | |
| | a. Complete the Sample Submission Form | | | | | | | | | |
| | b. | For sample submission via walk-in : Submit the completed Sample Submission Form and samples to UIRL Sample Acceptance Counter | | | | | | | | |
| | c. For sample submission via mail: Submit the completed Sample Submission Form and the samples. Sam must be packaged in a suitable container for courier delivery. The parcel should be addressed to the perincharge of the instrument, as it will be received directly by them. | | | | | | | | | |
| 3. | Fast lane is offered with an additional 50% charge from the normal price. | | | | | | | | | |
| 4. | For sample criteria and conditions, refer to UIRL Sample Submission Criteria in the PPMU website at ppmu.utm.my. | | | | | | | | | |
| 5. | PPMU has the right to cancel any analysis if the sample is suspected to have a high risk on the safety of the operator or can cause damage to the instrument during the analysis. The cost of damages will be borne by the customer. Posted samples will be received by laboratory personnel. | | | | | | | | | |
| 6. | Only samples that are ready to be analyzed are accepted by the lab. | | | | | | | | | |
| 7. | The remaining samples will be disposed of within a month after analysis is completed. | | | | | | | | | |
| 8. | Quotation will be provided upon request. | | | | | | | | | |
| 9. | Payment must be made within fourteen (14) working days after the invoice is issued. | | | | | | | | | |
| 10. | Analysis duration is within fourteen (14) working days after receiving the samples. | | | | | | | | | |
| 11. | The laboratory will provide test results after the payment proof is presented to the laboratory personnel. | | | | | | | | | |
| 12. | All inquiries regarding the CD Spectrometer should be forwarded to Assistant Science Officer, Ms. Nurhariani Jamhari (email: nurhariani@utm.my) or visit our website at ppmu.utm.my | | | | | | | | | |

^{*}All pages must be submitted



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| Form Num. | UIRL/F/91 |
|-------------------|-----------------|
| Version | 1/2025 |
| Effective Date | 08/01/2025 |
| Equipment | CD SPECTROMETER |
| Sample Serial No. | UIRL/ |
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MASS SPECTROMETRY LABORATORY SAMPLE SUBMISSION FORM (INDUSTRY)

Application Details:

| 1. APPLICANT'S PERSONAL PARTICULARS | | | | | | | | | | | | |
|--|---|------------------------|----------|-----------------------|------------|-----------|-------------------|----------|--|----------------|--|--|
| Name of Applicant | | | | | | | | | | | | |
| Hand Phone No. | | | | | | | | | | | | |
| Email | | | | | | | | | | | | |
| Department/Division | | | | | | | | | | | | |
| Signature & Official Stamp | *A digital signature is not recommended. Any matters raised in the future are beyond our responsibilities | | | | | | | | | | | |
| | I have read and agreed to the General Rules and Requirements | | | | | | | | | | | |
| 2. COMPANY DETAILS | | | | | | | | | | | | |
| Name | | | | | | | | | | | | |
| Registration No. | | | | | | | | | | | | |
| Address | dress | | | | | | | | | | | |
| Telephone No. | | | | | | | | | | | | |
| Email | | | | | | | | | | | | |
| 3. PAYMENT | | | | | | | | | | | | |
| Method of Payment | UTM PayHub | | | | | Invoice | | | | | | |
| Mode of Service | Normal | | | | | Fast Lane | | | | | | |
| 4. SAMPLE & ANALYSIS INFORMATION | ON (pleas | se attach refer | red jour | nal) | | | | | | | | |
| Name of Sample | of Sample | | | | | | | | | | | |
| Sample ID | pple ID | | | | | | | | | | | |
| Sample Properties (Please tick (/)) | Toxic | | | Carcinogenic | | | | Others : | | | | |
| Range of Wavelength (nm) (Min 175 nm & Max 800 nm) | Low: High: | | | | | Step: | | | | | | |
| Signal | CD | | | | Absorbance | | | | | | | |
| Name of Solvent | | | | | | | | | | | | |
| Temperature (°C) (20°C - 25°C) | | | | | | | | | | | | |
| Temperature Ramping (°C) (Fill in if needed, 20°C - 95°C) | Start: Stop: Step: | | | | | | | | | | | |
| Essential Parameter (Fill in if there's information/tick if not known) | | Molecular Mass (Da) | | Concentration (mg/ml) | | | No. Am Acid | ino | | Path length | | |