

PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU)

Form Num.	UIRL/F/26
Version	2/2025
Effective Date	15/05/2025
Equipment	GCMS QP2010
Sample Serial No.	UIRL/
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ADVANCED MASS SPECTROMETRY LABORATORY SAMPLE SUBMISSION FORM

General Rules and Requirements:

and samples to UIRL					
the samples. Samples Idressed to the person					
nstead of the usual 14 price. Customers must					
For sample criteria and conditions, refer to UIRL Sample Submission Criteria in the PPMU website at ppmu.utm.my.					
fety of the operator or e customer. Posted					
Payment must be made within fourteen (14) working days after invoice is issued.					
Analysis duration is within fourteen (14) working days after receiving the samples.					
onnel.					
All inquiries regarding Gas Chromatography & Mass Spectrometry (GCMS) should be forwarded to the Assistant Science Officer Mdm. Shamimi Binti Ismail (email: shamimi.ismail@utm.my, tel: 07-5557729) or Assistant Science Officer, Ms Nurhariani Binti Jamhari , email: nurhariani@utm.my, tel: 07-5557720 or visit our website at ppmu.utm.my					

^{*}All pages must be submitted



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Application Details:

1. APPLICANT'S PERSONAL PARTIC	ULARS								
Name of Applicant									
Status of Applicant		Undergraduates		Master		PhD			Researcher
Student Matric No.									
Faculty/ Department									
Hand Phone No.									
Email									
2. SUPERVISOR DETAILS (for internal	applicant	and academic instituti	on only)					
Name of Supervisor									
UTM Staff ID No.									
Faculty/Department									
Hand Phone No.									
Email									
Signature & Official Stamp	*A digita	l signature is not recommend	ed. Any m	natters raised in	n the future a	are beyond	our res	ponsibilit	ies
	I have read and agreed to the General Rules and Requirements								
3. PAYMENT									
Method of Payment	UTM PayHub System Log card Invoice		ice	 ce					
Mode of Service		Normal		Fast La	ne	•			
Payment using Invoice		ch Vot No. Q.J091600.24C3.01D32)		•					
	Balanc	e of V29000							
4. SAMPLE & ANALYSIS INFORMATION	ON (plea	se attach referred jour	nal)						
No. of Samples & Labels									
Name of Sample									
Sample Properties (Please tick (/))		Toxic		Carci	nogenic				Others:
Name & Boiling Point of Solvent (°C)									
Boiling Point of Target Compound (°C)									
Types of Column (Please tick (/) one only)		BP10 BP5MS		BPX35			BP1		
Ciny,	luia ati			Solgel-Wa	ıx		BPX7	U	
		on Volume (μL) :							
CCMS Duoguore	Injector Temperature (°C) : Injection Mode (Split/Splitless) :								
GCMS Program									
	Interface Temperature (°C) : Ion Source Temperature (°C) :								
	100 201	urce remperature (°C):							



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	No	Rate (mL/min)	Temperature (°C)	Hold Time (min)
	1			
Temperature Program	2			
	3			
	No	Mol. Weight (MW)	Chemical Formula	Retention Time
Date the of Taranta of Commenced	No 1	Mol. Weight (MW)	Chemical Formula	Retention Time
Details of Targeted Compound	No 1 2	Mol. Weight (MW)	Chemical Formula	Retention Time