

External Analytical Request Form



Contact Name:

Company:

Department

Address:

Phone:

Fax:

Date:

Purchase Order No.*:

Quote No. (If Known):

Nano Imaging and Material Analysis Centre
School of Chemical and Bioprocess Engineering
University College Dublin
Belfield
Dublin 4
Ireland
Phone: +353 (0) 1 716 1724
Fax: +353 (0) 1 716 1177
www.ucd.ie/nimac

Techniques Required:

- TEM FIB SEM STEM SAXS 3D Optical Profilometry
 WDS EDX EBSD CL VASE

Additional Information Attached:

- Yes No

Sample Retention:

- Samples Returned Samples Discarded Samples Stored for 2 months

Report Format:

- Results Only Hard Copy E-Mail Fax

Priority Service Required:

- Yes No

VAT Details:

VAT Exempt No.:

VAT Exempt No. (If Applicable):

Additional Sample Information

Sample Ref

Sample 1:

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| <input type="text"/> | <input type="text"/> |
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Sample 2:

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Sample 3:

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Sample 4:

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Sample 5:

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| <input type="text"/> | <input type="text"/> |
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Sample 6:

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| <input type="text"/> | <input type="text"/> |
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*** Samples will not be scheduled for analysis with out a Purchase Order Number**

Submission of this form implies clients accept our terms and conditions of business, details of which are available upon request.

Thank You. We appreciate your business.