

INDIAN INSTITUTE OF TECHNOLOGY KANPUR
Department of Chemical Engineering
PG RESEARCH LAB



Room No- 302, NL-II, CHE

Ph No-6538

Booking Form

| | | |
|----------|-------------|-----------------|
| B | Autosorb iQ | TPR / TPD / TPO |
|----------|-------------|-----------------|

for Office Use

| | | | |
|-------------------|-----------|---------------------|--|
| Booking No | AIQ / B / | Booking Date | |
|-------------------|-----------|---------------------|--|

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|---------------------|-------------------|--|-----------|--|
| User Details | Name | | Roll / PF | |
| | Supervisor's Name | | Phone | |
| | Department | | Email | |
| | Project No. | | | |

| Data to be filled by User | | | | | | | | | | | For Office Use only | | | | | |
|---------------------------|-----------|---------------------|------|------|--------------------|------|------|----------|---------------------|----|---------------------|----------------|-------|------|------|------|
| Sr No | Sample ID | Treatment/Degassing | | | Other Treatment(s) | | | | Temperature Program | | | Sample Wt (gm) | Start | | End | |
| | | Temp | Time | Ramp | Temp | Time | Ramp | Flow Gas | From | To | Ramp | | Time | Date | Time | Date |
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|----------------|-----------------|--|---------|--|---------------|-----------------|
| Lab use | Liq N2 Used | | Date | | No of samples | Net Charge (Rs) |
| | LogBook Page No | | Done By | | | |

Kindly transfer Rs _____ from Project No _____ which is
Expiring on _____ to account no LDA/IITK /CHE/2024520

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| |
| Signature of User |
| |
| User Name |

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| |
| Signature of Head / PI / Supervisor |

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|-------------|----------------------|------|------------|
| Autosorb iQ | Instrument Charge Rs | 2500 | Per Sample |
|-------------|----------------------|------|------------|