

 <p>Bioaromatic Research Centre Pusat Penyelidikan Bioaromatik</p> <p>BIO/LAB/009 EFFECTIVE DATE : 01/03/2024</p>	<p>BIOAROMATIC RESEARCH CENTRE</p> <p>UNIVERSITI MALAYSIA PAHANG AL SULTAN ABDULLAH LEBUH PERSIARAN TUN KHALIL YAAKOB, 26300 KUANTAN PAHANG DARULMAKMUR PHONE:09-431 /EMAIL:infobarce@umpsa.edu.my</p>
	<p>REQUEST FORM</p>

A. CUSTOMER INFORMATION

Name			
Company/Institution			
Address			
Student ID			
Email			
Tel No		Fax No	

B. SERVICE INFORMATION

<input type="checkbox"/>	Testing	<input type="checkbox"/>	Training	<input type="checkbox"/>	Consultation	<input type="checkbox"/>	Rental
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C. LABORATORY

<input type="checkbox"/>	Molecular	<input type="checkbox"/>	Fermentation	<input type="checkbox"/>	Extraction	<input type="checkbox"/>	Analytical
Date of commencement :				Date of completion :			

No	Description/Type of Testing/Parameter	Method/Equipment

<input type="checkbox"/>	Return Sample to Customer
<input type="checkbox"/>	Dispose by Bioaromatic Centre

Bioaromatic Centre will ensure the information as confidential and impartial and use reasonable efforts to protect the confidentiality of such information. We will not use the information for other than stated purpose.

The information contained in this form will be kept securely by Bioaromatic Centre.

Customer's Signature	Recipient's Signature

D. SAMPLE INFORMATION (fill by Bioaromatic Centre's Staff)

Date Received				
Sample Marking				
Sample Description				
No of Sample		Normal		Abnormal
Action for abnormal				
Remarks				

E. PAYMENT DETAILS (fill by Bioaromatic Centre's Staff)

Usage charge (Please refer to the List of Charge)				
User	Testing/Training/Consultation/Rental	Charge (RM) (per sample/day/hour/unit)	Usage	Total Price (RM)
UMP/Non UMP				
Mode of payment : Cash/Cheque/POGrant number (if related) :				

F. VERIFICATION (fill by Technical Officers)

Verify by : _____ Date : _____