

Contact Person: En.Hazrul Nizam Hisham Hasmi (Senior Assistant Science Officer)

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APPLICATION FORM: MULTI LABEL PLATE FACILITIES / TRAINING

Training Rate

UiTM Rate

- RM6/well

Others Rate

- RM8/well

Use of Facility Rate

(Victor X5 Multi Label Plate Reader- Absorbance, Fluorescence, Luminescence)

UiTM Rate

- RM10/well
-

Others Rate

- RM14/well

Customer Information

Name of applicant : Date:

Full Address:

.....

Contact Number : Email Address :

Application Detail

Training (UiTM Rate =RM6/well)

Please specify =

Use of facility (UiTM Rate =RM10/well)

Please specify:

Training (Others Rate = RM14/well)

Please specify =

Use of facility (Others Rate = RM132/day/twice)

Please specify =

Declaration

I hereby declare that the activities carried out at the IMMB facilities are safe and appropriate for the space provided. I understand that any false or incomplete declaration may lead to damage or safety risks, and I will bear full responsibility for any consequences, including damage to facilities or equipment. I also agree to follow all lab rules, safety procedures, and housekeeping responsibilities when using the IMMB facilities or space.

Total Charge (RM) :

Signature of applicant :

For Office Use Only

Officer in Charge : Date In:

Accepted

Rejected

Comments :