



**SHOBHABEN PRATAPBHAI PATEL
SCHOOL OF PHARMACY & TECHNOLOGY MANAGEMENT
MUMBAI**

Service Request Form: Nano ZetaSizer (Make: Malvern ZS 90)

Name of Requisitioner :		Date:		
Name of Institute/ Industry				
Complete Postal Address				
E-mail ID			Mobile No.	
Please note-				
<ul style="list-style-type: none">• Samples should be in liquid/ solution / stable suspension form.• Organic sample cannot be handled for Zeta Potential				
Sr.No.	Sample Name/Code	Aqueous sample (Yes/NO)	Particle Size (√)	Zeta Potential (√)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Any additional information like handling precautions, if any				

❖ **Please enclosed copy of ID card and payment receipt.**

Signature of Requisitioner

Approved by

Signature of Guide/Head of Institute/
Authorised Person

Dean, SPPSPTM

Seal