



Infra HIR Office,
Level G, High Impact Research (HIR) Building,
University Malaya, 50603 Kuala Lumpur
Tel: +603-7967 7080/ 7763
e-mail: infra_hir@um.edu.my

REF. NO: _____

REQUEST FORM

☐ SERVICE

☐ PROJECT

☐ WORKSHOP

CUSTOMER INFORMATION

Laboratory / Dept. / Faculty / Company			
Address			
Customer Details	Name		
	Matrix / Staff No		
	HP/Tel (O)		
	Email		
Sample Description			
Submission Date			

*UM staff/student: @um.edu.my / @siswa.um.edu.my

TERMS AND CONDITIONS

- Payment shall be made at least three (3) working days prior to schedule date to :
 - By Grant - **UM.0000517/KWJ.AK Tabung Perkhidmatan INFRA@HIR** OR
 - epay.um.edu.my** - Epay Instructions: Register/Log In-> Bayaran mengikut kategori -> Perkhidmatan -> IPPP -> Perkhidmatan Analisis HIR -> Keterangan (state name of equipment & booking hours)
- Laboratory has the right to reject the booking made if failure to make payment on time.
- Booking must be done at least three (3) working days before the scheduled date.
- Advance payment will be forfeited for any cancellation made less than 3 working days prior to the scheduled date. **"NO REFUND WILL BE PROVIDED FOR ANY PAYMENT THAT HAS BEEN SUBMITTED."**
- All payment terms are 100% upon agreement. The payment made is subject to one (1) year validity from submission date.
- INFRA HIR will not be responsible for any loss and/or damages to user(s)'s property that occurs while using INFRA HIR facility(s).
- Users must abide by all safety regulations and rules. All usage should be logged, all recommendations for proper usage of methods and samplings should be complied. All working areas should be thoroughly cleaned and all scheduled waste collected as indicated after completion of analysis. Abuse and disregard of any rules or requirements will result in loss of instrumentation privileges.

☐

I have read and agree the Term and Condition above

TYPE OF PAYMENT

 Project No.:
WBS No:

 e-Pay Receipt No.:
PO No.:

*Please tick (✓)

Customer declaration, signature & stamp*

I agree to allow *Bendahari UM* to debits total amount of RM_____ from stated grant/allocation to '**Tabung Perkhidmatan Dan Penyewaan Peralatan Di Bangunan High Impact Research**' for this service charge. I hereby agree with all terms & condition stated above.

 Customer Signature :
Date :

 Supervisor Signature & Stamp :
Date :

FOR OFFICE USE ONLY

Received by :

Date :

Approved by :

Date :

TYPE OF RENTAL SERVICES/FACILITIES: *Please tick ✓

SERVICES/FACILITIES				
Equipment	Please tick (✓)	Quantity	Unit Price (RM)	Extended Price (RM)
1. Autoclave				
2. Bench Top Centrifuge				
3. Biolog OmniLog GEN III				
4. BioMark HD Reader				
5. Biosafety Cabinet				
6. ChemiDoc MP System				
7. Freezer - 80°C				
8. Freeze Dryer				
9. Fume Hood				
10. GCMS				
11. Gel Doc XR + Imaging System				
12. Gradient 384 Well PCR Thermal Cycler				
13. Homogenizer				
14. Inverted Microscope				
15. LCMS (Q-TOF / QQQ)				
16. Live Cell Imaging Microscope				
17. MiliQ Ultrapure Water				
18. Monochromator Based Microplate Reader				
19. Nanodrop				
20. NMR (300MHz / 600MHz)				
21. Orbitrap Fusion				
22. PCR Machine (ABI Veriti)				
23. PCR System Quantstudio 12K				
24. Qubit				
25. Simple Light Microscope				
26. Table Top Scanning Electron Microscope (SEM)				
27. Tissue Lyser II / LT				
28. Ultra High Performance Liquid Chromatography (UHPLC)				
29. Others :				
Total (RM)				

Updated: 13/3/2024 anah