

## SPARKVY ADVANCED RESEARCH AND INNOVATIONS

## **REQUISITION FORM FOR PHOTOCATALYTIC ANALYSIS**

Ph: 0422-6794192	E-mail: info@sparkvyresearchhub.com
	Date:
Name of the Applicant	
Designation	
Name of the Research Supervisor	
Department / School	
University/Institute	
E-mail ID	
Contact Number	
Characterization Required	
Number of Samples	
Nature of the Sample	
Sample Properties	
	Signature of the Applicant
	Signature of the Apprount
	For Office Use
Sample Reference Number :	
Sample Received By :	
Sample Received On :	
Slot Completed On :	
Results Sent On :	
Remarks :	
	For SparkVy Advanced Research and Innovations
	Authorized Signature

		Sample Information		
Sample Code	Elements Presented	Analysis Required		If Any Specific condition
Dye				
Time Interval				
Dosage Differen	ce (%) – Photo catalyst			
Dosage Differen	ce (%) – Dye			
oH difference				
Scavenger – Four Radicals		YES/NO	Stability Cycle	s YES/NO
Others				

## **Payment Details**

Account Name: SparkVy Advanced Research and Innovations

Account Number: 120034201540 Branch: Chinniyampalayam SME

Branch Code: 05997

IFSC Code: CNRB0005997



## **Acknowledgement:**

Any journal publications/presentations/proceedings etc. arising out of the research facility must be acknowledged by the users.

Please follow the following format for the acknowledgements:

For Electrochemical work station: We acknowledge the Sparkvy Advanced Research and Innovations(SARI) for providing the Electrochemical work station facility.