INHART LABORATORY	Ref. No.	IH-OPE-F07B
	Revision No.	2
Laboratory Booking Form (FTIR)	Effective Date	07/01/2025
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Booking No: IH-LBF-	
Supervisor Name: Student Name: Study level/ Position: Dept./Company/Institute:	
	B
	From
Date	
Time	
Information on Equipr	
1	
Method of Work/ Parameters	

- **Spectral range (cm^{-1}):**
- **Spectral resolution (cm^{-1}):**
- **Result in (please tick) :** ☐ **Absorbance** ☐ **Transmittance**
- **Any comparison graph?: (Yes / No)**
  if yes, please state: _____
- **If liquid sample, what solvent/ background**
  _____

***Please attach reference method from journal/ artic**
applicable)

Notes:
**All applications for booking must be reach the INHAR*
****Analysed samples** must be collected by the custome*

I have read, understand and will abide the laborator
security during my presence.

Requested by :
Name :
Date :
Signature

Approved by (Science Officer
Name : Signature : Stamp :
Sample run by:

Account Deduction (/)	**YES**	

Quote No.:
Memo No.: