## Pir Mehr Ali Shah Arid Agriculture University Rawalpindi Central Research Laboratory

## **Equipment Use Request Form for External User**

|   | Dated:                      |
|---|-----------------------------|
| Name of Researcher/User:                            | Contact No:                 |
| University / Institution:                           | Degree:                     |
| Department:   |                             |
| Name of Equipment to be Used:                       |                             |
| Number of Samples:                                  |                             |
| Recommended by Head/Director/Superviso              | or:                         |
| Name & Designation:                                 | Signature & Stamp:          |
|   |                             |
| Availability of Equipment:                          |                             |
| Recommended by E-Engineer/Lab Superintene           | dent:                       |
|   |                             |
| Approved by:  |                             |
| In-charge, Central Research Lab.:                   |                             |
|   |                             |
| Total amount to be paid:                            | Treasurer Office Receipt No |
|   |                             |
| Approved rate of equipment to be used (per sample): |                             |
| Recommended by E-Engineer/Lab Superintendent:       |                             |
| Approved by:  |                             |
| In-charge, Central Research Lab.:                   |                             |
|   |                             |

Note: For external users from government departments / universities, it is mandatory to attach the copy of employee card / student card.