



INSTRUMENTAL ANALYSIS APPLICATION FORM

Materials Engineering Laboratory,
Faculty of Mechanical Engineering,
Universiti Teknologi Malaysia,
81310 Johor Bahru, Johor
Tel: 07-5534808
Website : <https://mech.utm.my/material-lab/>

APPLICANT DETAILS

Name : _____
Name of Supervisor / Company : _____
(Signature & Stamp) : _____
Type of project : PSM ☐ MSc ☐ PhD ☐ Research ☐ Consultancy ☐
Mode of Payment : Invoice ☐ Internal Invoice ☐ Log Card ☐
Vot. Number (If Applicable) : _____ Email : _____
Phone Number : _____ Date : _____
Description of sample : _____

Item	Description of Equipment	Unit Price (RM) / Sample				No. of samples	Total (RM)
		UTM	√	Non UTM	√		
1.	(a) Field Emission Scanning Electron Microscope (FESEM) ~ max. 5 images	200		400			
	(b) FESEM + EDX / Mapping	300		500			
2.	(a) Variable Pressure Scanning Electron Microscope (VPSEM) ~ max. 5 images	100		350			
	(b) VPSEM + EDX / Mapping	200		450			
3	Sample preparation (cutting, grinding, polishing, etching)	NA		200			
4.	Optical Microscope (with sample preparation)	NA		350			
5	Image Analyzer	NA		350			
6.	Coating (Gold)	50		60			
7.	Hardness Testing	50		100			
8.	Impact Test	50		100			
9.	Salt Spray (Per Batch)	10/ hour		25/ hour			
10.	Furnace (Low / High Temperature)	20/ hour		40/ hour			
11.	Corrosion Test (a) Polarization / potentiostat (b) Open circuit potential / Galvanic cell.	20/ hour (subsequent hour; 10/ hour)		100/hour (subsequent hour; 50 /hour)			
12.	Optical Emission Spectroscopy (OES) (Including cutting, grinding)	10/ element		20/ element			
13.	Others						
GRAND TOTAL (RM)							

Service Duration and Test Report: The duration of the service is depending upon the type of testing / analysis and normally between 10-30 days (or requests if necessary).

Sample Delivery: All samples should be delivered to Material Engineering Laboratory. If the sample is requested to be collected, delivery charges will be borne by the customer between RM50 - 500 depending upon the distance from UTM.

****Payment should be to "BENDAHARI UTM" CIMB BANK BERHAD Account number 8006053536**

Approval: _____ **Date:** _____ **Designated Staff:** _____

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