

**ADVANCED CENTRE OF ENVIRONMENTAL STUDIES AND SUSTAINABLE DEVELOPMENT****MAHATMA GANDHI UNIVERSITY - 686 560****WATER QUALITY ANALYSIS REQUEST FORM**

Name			
Address			
Email ID			
Mobile			
Sample details (specify the source)		No. of samples	
Parameters required (Tick which are applicable)	1. pH 2. TDS 3. Hardness 4. Chloride 5. Salinity 6. Iron 7. Total coliform 8. E-Coli (sample should be collected in a sterile bottle for microbial analysis)	If any other parameters please specify	
Purpose for which requested (in brief)			
Category (Tick whichever is applicable)			
Industries	Research institution	Household	
Department with in MG university	Colleges affiliated to MG university	Other Educational institutions	
Payment Method		Payment date :	
Payment Proof (Transaction id/number/transaction details)			
Name and signature of applicant	Name and signature and seal of (HOD/Principal/Guide/Managing Director) only if applicable		
FOR OFFICE USE ONLY			
Please collect RS..... (in words.....) being the analysis charge for.....sample under the category.			
Approved/Not approved Faculty in charge		Lab in charge	