



COMSATS University Islamabad- Lahore Campus

Department of Chemical Engineering

Moving Die Rheometer (MDR 3000) Sample Submission Form

(Doc No.: CIIT-LHR/ChE-Lab/Temp/)

1. Submitter Details

Name	
E-mail Address	
Dept. & University/ Industry Name	
Mobile No.	

2. Sample Details

Number of Samples	(Maximum 5 Samples)				Date:
Sample ID (s)					
Formula/Composition of compound					
Quantity (g) of each Sample					

3. Sample Analysis Details

Sample IDs	Mixing Conditions	Measurements Required (Tick the relevant box)			
	RPA Type : MDR-3000 Sample Cutter: VS 3000 Temperature : _____ Angle : _____	Elastic Torque (S')	<input type="checkbox"/>	Viscous Torque (S'')	<input type="checkbox"/>
		Turnover Times (TC) (TC 10 – TC 95)	<input type="checkbox"/>	Scorch Time (TS 0,1...20)	<input type="checkbox"/>
		Phase Angle	<input type="checkbox"/>	tan δ	<input type="checkbox"/>
		<u>Graph Representation:</u> X-Axis : Time Y-Axis 1: _____ Y-Axis 2: _____			
	RPA Type : MDR-3000 Sample Cutter: VS 3000 Temperature : _____ Angle : _____	Elastic Torque (S')	<input type="checkbox"/>	Viscous Torque (S'')	<input type="checkbox"/>
		Turnover Times (TC) (TC 10 – TC 95)	<input type="checkbox"/>	Scorch Time (TS 0,1...20)	<input type="checkbox"/>
		Phase Angle	<input type="checkbox"/>	tan δ	<input type="checkbox"/>
		<u>Graph Representation:</u> X-Axis : Time Y-Axis 1: _____ Y-Axis 2: _____			

	RPA Type : MDR-3000 Sample Cutter: VS 3000 Temperature : _____ Angle : _____	Elastic Torque (S') <input type="checkbox"/> Viscous Torque (S'') <input type="checkbox"/> Turnover Times (TC) <input type="checkbox"/> Scorch Time <input type="checkbox"/> (TC 10 – TC 95) (TS 0,1...20) Phase Angle <input type="checkbox"/> tan δ <input type="checkbox"/> <u>Graph Representation:</u> X-Axis : Time Y-Axis 1: _____ Y-Axis 2: _____
	RPA Type : MDR-3000 Sample Cutter: VS 3000 Temperature : _____ Angle : _____	Elastic Torque (S') <input type="checkbox"/> Viscous Torque (S'') <input type="checkbox"/> Turnover Times (TC) <input type="checkbox"/> Scorch Time <input type="checkbox"/> (TC 10 – TC 95) (TS 0,1...20) Phase Angle <input type="checkbox"/> tan δ <input type="checkbox"/> <u>Graph Representation:</u> X-Axis : Time Y-Axis 1: _____ Y-Axis 2: _____
	Rotor Type : Banbury Mixing Time : _____ Temperature : _____ Rotor Speed : _____ Filling % : _____	Elastic Torque (S') <input type="checkbox"/> Viscous Torque (S'') <input type="checkbox"/> Turnover Times (TC) <input type="checkbox"/> Scorch Time <input type="checkbox"/> (TC 10 – TC 95) (TS 0,1...20) Phase Angle <input type="checkbox"/> tan δ <input type="checkbox"/> <u>Graph Representation:</u> X-Axis : Time Y-Axis 1: _____ Y-Axis 2: _____

4. COSHH Details

4.1 Hazards for each respective sample

Sample IDs	Hazards Identification (HAZID)						
	Very Toxic	Toxic	Flammable	Corrosive	Harmful	Irritant	Highly reactive
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.2 Specific precautions for each sample

Sample IDs	Precautions			
	Gloves	Mask	Fire Extinguisher (For Flammable materials)	Other (specify)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

I declare that I have assessed the risk of using the samples listed above and consider that they are safe to use provided that good laboratory practice is followed together with the safety requirements as detailed above.

By signing this form I agree the terms and conditions as stated below:

- No sample will be accepted/tested without completing the COSHH form.
- The amount of the sample submitted for testing may be lost.
- The scan graph and other related data will be provided on a CD provided by the submitter.
- Well prepared samples must be provided. Our lab will not be allowed for preparing/refining samples.
- The samples must be sent through proper channel.
- Maximum 5 samples can be submitted at one time.**
- For samples originating from other sources than CIIT, extra terms and conditions will be applied. For details, contact Dr. Zulfiqar Ali (zulfiqarali@ciitlahore.edu.pk) OR Engr. Mulazim Ali (mulazimali@ciitlahore.edu.pk).
- The sample indicated in this COSHH form are mine and do not originate from some other university/institute/organization.**

Name (Submitter)		Signature & Date	
Name (Supervisor)		Signature & Date	

For Official Use Only (Do not write below this line)

Approval and comments

Equipment in-charge name: _____ Signature & Date: _____

Lab In-charge name: _____ Signature & Date: _____