

## Requisition Form for Helium Leak Detector

**Name of the user :** .....

**Research Group/ Laboratory**

**Name :** .....

**Name of the Instrument**

**Where to be used** .....

**Whether a preliminary leak test has been carried out using Alcohol etc** .....

**Vacuum last reached** .....

**Approximate usage time** .....

Sign of the user with date

Sign of the Supervisor with date

- . The leak detector would be operated by the technical cell Assistants.
- . Now open for internal users only.

**Remarks** (For Technical Assistant):