



DEPARTMENT OF CHEMISTRY  
INDIAN INSTITUTE OF TECHNOLOGY MADRAS



## Sample Submission

- The users should fill up the form (given below) and submit it with the sample
- Each sample has to be listed separately.
- External samples will be analyzed in que at a fixed rate.

## Payments

- External users, please call and confirm the status of the instrument and then
- Draw a DD in favour of "**The Registrar, IIT Madras**" for the appropriate amount or you can swipe the card for the appropriate amount using swipe machine available in the department office with the sample.

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The **Porosimeter** is currently located in **ACB-107** and you are welcome to visit the room after prior appointment

## Fees

### Students from other Departments of IIT Madras

- |   |                    |
|---|--------------------|
| 1. Surface area                                     | Rs. 450 per sample |
| 2. Surface area, Pore volume, Poresize distribution | Rs. 900 per sample |

### Academic and Govt. Institutions

- |   |                    |
|---|--------------------|
| 1. Surface area                                     | Rs.750 per sample  |
| 2. Surface area, Pore volume, Poresize distribution | Rs.1500 per sample |

### Industries and non Govt. Institutions

- |   |                    |
|---|--------------------|
| 1. Surface area                                     | Rs.1500 per sample |
| 2. Surface area, Pore volume, Poresize distribution | Rs.3000 per sample |

## Contact

**In-Charge / Mr. A. Narayanan**  
**Porosimeter Facility**  
Department of Chemistry, IIT Madras  
Chennai 600 036.  
Ph: 044-2257 5204  
Fax : 044- 2257 4202  
Email: [cyoffice@iitm.ac.in](mailto:cyoffice@iitm.ac.in)

Job No: \_\_\_\_\_

External users only

**DEPARTMENT OF CHEMISTRY, I.I.T Madras**  
**Porosimeter Request Form**

Name of the Student : \_\_\_\_\_

Date: \_\_\_\_\_

Name of the Guide : \_\_\_\_\_

Tel no: \_\_\_\_\_

University /College : \_\_\_\_\_

email: \_\_\_\_\_

**SERVICE REQUESTED**

1. Surface area alone
2. Surface area, pore volume, pore size analysis

**Experimental Requirement**

**Sample Name** :

**Sample Nature** :

**Outgassing conditions**  
**(Temp/duration)** :

I hereby agree to acknowledge the data and results obtained from this machine in publications and thesis.

**Signature of the Guide**

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**Coordinator's Signature**

Date: \_\_\_\_\_ Time: \_\_\_\_\_

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**Payment Details: DD No:**

**Bank:**

**Analysed on:**