**Date: …………**

**Request Form**

 **(External User)**

**Details of the user (student/employee)**

Name & Address :

Email and Mobile no :

Brief description of work :

Name of the machining facility to be used : VMC/ AWJM/ 3D Printer / 3D Scanner / TIG MIG Welding/ Others

 Please specify …………………………….

**Payment details (Use the following bank details to make the transaction)**

**Customer Name: Messrs FOUNDATION FOR INNOVATORS IN SCIENCE AND TECHNOLOGY**

**Account No:6244101000090, IFSC: CNRB0006244**

**Tentative allotted slot for machining: Date:…………, Time: …………………**

**Approved by**

**Machine/Lab I/c Engineer CEO Prof. K Patra, PIC, FIST**

**For office use only**

Name of the facility used in Hrs. Or gm. :

Total machining facility charge in Rs :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Only.**

**Machine/Lab I/c Engineer** **Accountant Section CEO Prof. K Patra, PIC, FIST**