



## Application Form: Flow Cytometry Services

(Version: Nov 20, 2014)

**VC/FCS/2014-15/**
**Date:**

### 1. Applicant information

1.1	Applicant full name	
1.2	Affiliation/ profession	
1.3	Full postal address for correspondence	
1.4	Phone	
1.5	Fax	
1.6	Email	

### 2. Company information

2.1	Name of company (Regd or proposed)	
2.1.1	Tick the correct option	<ul style="list-style-type: none"> <li>• Proprietor</li> <li>• Partnership</li> <li>• Pvt Ltd</li> <li>• Other</li> </ul>
2.1.2	If other, please specify	
2.2	Alternative correspondence address (if different from above address of applicant)	
2.3	Website of company	
2.4	Nature of business	

### 3. For NCL Staff / Student

3.1	Division	
3.2	Project Title	
3.3	Project Code	
3.4	Name of Project Leader	

### 4. Application for services

4.1	Service Type	Facility Assisted Flow Cytometry
4.2	Number of samples	

### 5. Application for discounts

5.1	I wish to apply for the following discounts:	
	Resident incubatees of BioIncubator at Venture Center	
	Incubatees of Venture Center's Lab2Mkt program and Proof-of-concept projects associated with Venture Center	
	CSIR-NCL scientists and students; Start-ups with	



	substantial NCL related participation (know-how, staff, students, alumni)	
	Non-profits educational and research institutes; Social enterprises	
	Associate incubatees of BioIncubator at Venture Center	
5.2	Please attach any attachments to support your claim for discounts (if required)	

#### 6. Sample details

6.1	Experiment type (phenotype, cell cycle, apoptosis etc.)		
6.2	Additional information		
6.3	List fluorophores and associated excitation and emission spectra:		
	Fluorophore	Excitation	Emission

#### Payment Terms:

- All services are offered against advance payment in full. Service tax and other taxes applicable at the prevailing rate shall in addition to the above.
- Payment via a) Demand Draft, b) Cheque payable in Pune or at par or c) bank transfer are possible. All payments have to be made in the name of “**Entrepreneurship Development Center**”
- Booking once made shall not be transferrable or payment made thereof shall be non-refundable. On the occasional case where Venture Center is unable to carry out the experiment due to equipment failure or absence of staff, Venture Center shall inform the applicant immediately and refund the payments made to it.

It is hereby declared that the undersigned has read and understood the terms and conditions of Venture Center’s Confocal microscopy services and accepts the same.

The undersigned authorized representative of the applicant also declares that all the information given herein above is true and correct to the best of his personal knowledge and belief and also understands that in the event of any information found to be untrue or incorrect, the contract of the said services is liable to be terminated forthwith.

For and on Behalf of  
 (Name of the Company)

(Name of the authorized signatory)  
 Designation