

The Center for Scientific and Technological Equipment, Suranaree University of Technology

| (Authorized person only) | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|
| Requested No// | | | | | | | |
| Date | | | | | | | |
| Time | | | | | | | |
| Sample Receiver | | | | | | | |

111 University Avenue, Suranaree Sub-district, Mueang District, Nakhon Ratchasima 30000 Tel. (044) 223313-4 Fax. (044) 223260

| | | tion Materials Testing | | | | | |
|---|--|--|--|--|--|--|--|
| Part 1 (For customer) | | | | | | | |
| 1. Name, | Job position | Contact address | | | | | |
| House NoMooRoad | • | | | | | | |
| Postal CodeTel | | = | | | | | |
| 2. Request for: ☐ Construction materials testing ☐ | | | | | | | |
| Other services (please specify) | | it (i tease speelly the instrument name | C) | | | | |
| 3. Type of customer: ☐ from SUT internal divis | | \square from other organizations | | | | | |
| ☐ Teaching/Project Subject | | | certified letter from superior) | | | | |
| ☐ Thesis Subject codeThesis entitle | | | • | | | | |
| _ mesis subject code | | letter from superior) | viii. 30 · (viii. ceruiied | | | | |
| ☐ Research entitled | | · | eneral people | | | | |
| ☐ Others (please specify) | | | | | | | |
| 4. Customer's name and address to be specified on | | | | | | | |
| | | | | | | | |
| 5. Customer's name and address to be specified or | | | ersion, please fill in using | | | | |
| English language): □ in accordance with name and a | address in Item 1 U Oth | er (please specify) | | | | | |
| 6. Specimen details and service/instrument reques | ted for use (please fill in t | he form in Item 6 on the next page) | | | | | |
| 6.1 Quantity of specimen (s) Request for | · · | , - | after specimen (s) is delivered) | | | | |
| 6.2 Storage condition : □ Room temperature □ Chi | | Result Shipment: ☐ Self-receiving | | | | | |
| 3 | | result to | | | | | |
| 6.3 Retrieval of specimen (s): \square No \square Yes (within 10 d | | Payment method: ☐ By cash ☐ M | | | | | |
| | | ☐ Cheque (with evidence) | | | | | |
| 6.4 Request to be presented on service date: \Box Y | | Other requests (please specify | | | | | |
| 6.5 Request for Decision criteria : ☐ No ☐ Yes, spe | | | | | | | |
| 6.9 Request for Uncertainty report: ☐ Yes ☐ No | , | | | | | | |
| 6.10 (For customer from SUT internal division) I her | reby agree to submit for | payment of service used at CSTE w | ithin (Date/Month/Year) | | | | |
| and declare the service cost to be responsible by | | | | | | | |
| 2,12 | | | ase there is tale payment | | | | |
| from the abovementioned date. Lauthorize SUT to | deduct my salary or othe | | | | | | |
| from the abovementioned date, I authorize SUT to | | r income related to SUT employment | • • | | | | |
| from the abovementioned date, I authorize SUT to 6.11 I hereby agree to abide by the terms and cond | | r income related to SUT employment | • • | | | | |
| 6.11 I hereby agree to abide by the terms and cond | ditions contained in this o | r income related to SUT employment document. | for the service cost. | | | | |
| 6.11 I hereby agree to abide by the terms and cond Customer's signature | ditions contained in this of the contained in the contained | r income related to SUT employment document. gnature(for customer f | for the service cost. | | | | |
| 6.11 I hereby agree to abide by the terms and cond Customer's signature | Superior's si | r income related to SUT employment document. gnature(for customer f | for the service cost. | | | | |
| 6.11 I hereby agree to abide by the terms and cond | ditions contained in this of the superior's si) (| r income related to SUT employment document. gnature(for customer f | for the service cost. | | | | |
| Customer's signature | ditions contained in this of the superior's si) (| r income related to SUT employment document. gnature(for customer f | for the service cost. | | | | |
| 6.11 I hereby agree to abide by the terms and cond | ditions contained in this of the superior's si) (| r income related to SUT employment document. gnature(for customer f | for the service cost. | | | | |
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| Customer's signature | ditions contained in this of the second states of the second seco | r income related to SUT employment document. gnature(for customer f)/ | for the service cost. | | | | |
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| Customer's signature | ditions contained in this of the state of th | r income related to SUT employment document. gnature(for customer f)/ | for the service cost. from SUT internal division only) | | | | |
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| Customer's signature | Superior's si Superior's si) t 5 6 ation with customer becimen Approve and v est, CSTE has already inform the service, CSTE is under | r income related to SUT employment document. gnature | for the service cost. from SUT internal division only) | | | | |
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| Customer's signature | Superior's si t 5 6 7 8 8 8 9 9 10 10 10 10 10 10 10 10 | r income related to SUT employment document. gnature | for the service cost. from SUT internal division only) | | | | |
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| Customer's signature | Superior's si Superior's si) t 5 6 2 ation with customer becimen Approve and v est, CSTE has already informed related red it, and informed related | r income related to SUT employment document. gnature | for the service cost. from SUT internal division only) THB | | | | |
| Customer's signature | Superior's si Superior's si) t 5 6 2 ation with customer becimen Approve and v est, CSTE has already informed related red it, and informed related | r income related to SUT employment document. gnature | for the service cost. from SUT internal division only) | | | | |



Construction Materials Testing Laboratory

The Center for Scientific and Technological Equipment, Suranaree University of Technology Specimen Submission Form (For Concrete Specimen Testing)

| Request No.: Sample No.: | | | | | | | | | | |
|--|----------------------------------|-----------|---------------------|---------|---------------------------------|------------------------|------------|----------------|-----------------|-----------------|
| 6. Specimen Details | | | | | | | | | | |
| Type of | Cylinder | 100×200 | | 150×300 | <u> </u> | | •••• | Corring | | |
| Specimens | Cube | 100x1 | 100×100 | | 150×150×150 | ☐ | | | | |
| Specimen | Mix/Product Code | Slump | Specim | en | Casting Date | | Casting | Specimen | | Remark |
| No. | | | Set N | ٥. | | | Time | Condition | | |
| | | (cm) | | | (on Specimen Label) | | Start at | | | |
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| Sample Co | ondition: 1=Good, 2=[| Damaged | , 3=Con | tam | nination , 4=Hone | ycomb , | 5=Unparal | lel , 6=Unsn | nooth Surface , | 7=Moist , 8=Dry |
| Remark : | In the case of abnorm | al specin | nens, th | ne l | aboratory will no | ot condu | ct testing | and will re | turn the specin | nens. |
| If the servi | ice requester confirms | the nee | d for te | stir | ng, please mark | with " √ ˈ | 1 | | | |
| | testing even if the specimen doe | | | | Signature of Sampl | | | | | |
| ☐ Immediately ☐ Test when the specified age is reached | | | Mr. Kowit Gathinmai | | | Mr. Arti Nakronriab | | | | |
| *In the event of a holiday, please conduct the testing on the date specified in the remarks column. | | | Mr. Sutham Sukampa | | | Mr. Chaiya yodkhoksung | | | | |
| Customer's signature | | | | | | | | | | |
| (| | |) | | Mr. Jakkrit Thanamanywut | | | | | |
| | /// | | | | // | / | | | | |
| Section 3 (For Authorities) | | | | | | | | | | |
| 1. Head of Department's Comment 2. Approval Consideration | | | | | | | | | | |
| Approved Others | | | | | Approved Disapproved Because of | | | | | |
| | | | | | | | | | | |
| (Mr. Prapol Jarataku) | | | | | | | (M | ls. Srisuda Ka | ewkoompai) | |
| Head of | f the Engineering Labora | atory Dep | artment | : | | Н | ead of the | Engineering | and Supports D | Division |
| // | | | | | | | | | | |



Construction Materials Testing Laboratory

The Center for Scientific and Technological Equipment, Suranaree University of Technology Specimen Submission Form (For Reinforced Steel Bar Testing)

| Request No.: | | | | Date :/ Sample No. : | | | | | | | | |
|---|-----------|----------------|---------------------------|----------------------|---|-----------------------------|----------|-----------------|--|--|--|--|
| 6. Sample Detail | | | | | | | | | | | | |
| Specimen | Specimen | Quantity | Nominal Size | Grade | Manufacturer | Lot No. / Production Date / | Testing | Specimen | | | | |
| Set No. | No. | of | | | (Abbreviation) | Specimen Code / Remark | Code | Condition | | | | |
| | | Specimen | | | | | | | | | | |
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| | | | | | | | | | | | | |
| Customer's | signature | | | | Signature of Sample Recipient | | | | | | | |
| | | | | | | Mr. Kowit Gathinmai | Mr. A | arti Nakronriab | | | | |
| | | | | | | Mr. Sutham Sukampa | <u> </u> | | | | | |
| () | | | | | Mr. Jakkrit Thanamanywut | | | | | | | |
| | | | | | // | | | | | | | |
| | | | | | ion 3 (For Author | | | | | | | |
| 1. Head of Department's Comment | | | 2. Approval Consideration | | | | | | | | | |
| Approved Others | | | | | Approved Disapproved Because of | | | | | | | |
| | | | | | | | | | | | | |
| | (1) | Иr. Prapol Jar | ataku) | | (Ms. Srisuda Kaewkoompai) | | | | | | | |
| Head of the Engineering Laboratory Department | | | | ent | Head of the Engineering and Supports Division | | | | | | | |
| // | | | | | / | | | | | | | |