



Calibration Requisition Form

Applicant Information:

Applicant's Name	
Profession	

Academic/Research Institute/Company/Organization	
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Address Line # 1			
Address Line # 2			
City		Telephone	
State		Fax	
Country		Email	
Pin/Zip Code		Website	

Information of the Sensor to be Calibrated

Sl.No	Instrument	Make	Model	Serial No.
1				
2				
3				

A copy of the existing calibration certificate of the instrument/s is/are to be enclosed.

Payment Details:

We enclose herewith the remittance by **Demand Draft** drawn in favour of **NATIONAL INSTITUTE OF WIND ENERGY**, payable at **Chennai** (or) through **RTGS/NEFT**

Demand Draft No/Transaction ID.....dated.....

Rs.Rupees (.....

.....)

Drawn on (Banker's Name).....

Date:

Name:

Designation:

Signature with Seal