

Permeation Device Quotation Form

PLEASE FILL OUT THIS FORM COMPLETELY!

Chemical

Name	
CAS number	

Permeation Rate

Either specify the permeation rate

Permeation rate (ng/min)	min:		max:	
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Or specify target concentration and sample flow

Concentration (ppm)	min:		max:	
Carrier flow (mL/min)	min:		max:	

Permeation Chamber Temperature

Temperature (°C) [default: 30 – 110 °C]	min:		max:	
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Permeation chamber dimensions

Do you have an original VICI Dynacalibrator?

VICI Dynacalibrator [default: yes]	yes:		no:	
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If "no": specify the permeation chamber dimensions

Length (cm) [default: 23.5 cm]	
Diameter (cm) [default: 1.6 cm]	

Does the device need to be certified?

Certification	yes:		no:	
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Personal information or distributor information

Company name:	
Buyer name:	
Date of request:	

*** Please notice: if no user values are given, default values will be applied.**

Optional: Additional relevant information

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