**CUSTOMIZED ELISA KIT APPLICATION FORM**

**Ⅰ.CUSTOMER INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME |  | DATE |  |
| INSTITUTION |  | ADDRESS |  |
| E-MAIL |  | TEL |  |

**Ⅱ . SAMPLE**

|  |  |  |  |
| --- | --- | --- | --- |
| SAMPLE TYPE |  | SAMPLE SPECIES |  |
| NUMBER |  | EXPERIMENT GROUP |  |

**Ⅲ .DETECTION INDEX**

|  |
| --- |
|  |
|  |

**Ⅳ .CHARGES**

|  |  |  |
| --- | --- | --- |
| SAMPLE NO. | CHARGES | EXPERIMENTAL PERIOD |
| LESS THAN 10 |  | \_WORKDAY |
| LESS THAN 45 |  | \_WORKDAY |
| MORE THAN 45 |  | \_WORKDAY |

The experimental periods and the charges depends on the specific sample and experiment. They are determined after consultation.

**Ⅴ.NOTES**

1. The customers provide the specimen and its information.
2. After signing the contract we will carry out the experiment in full accordance with customers’ requirement.
3. Customers should be responsible for the problems caused by their own samples or reagents. Genasia keep the experimental information confidential.
4. Customers prepay the fee after signing the contract.
5. After the experiment，customers are responsible to inform us how to deal with the sample and reagents left in time.