

# Request for Coating

No.:

**D-PHYS:**  CHF 50.- / Charge

Thermic Deposition

**ETH:**  CHF 100.- / Charge

**External:**  CHF 150.- / Charge (noble metals excluded)

**Customer**

Contact Person \_\_\_\_\_  
Building / Room \_\_\_\_\_  
Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

**Group**

Department \_\_\_\_\_  
Professorship \_\_\_\_\_  
Billingnumber \_\_\_\_\_

**Layers**

Material	Layer thickness [nm]
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Remarks**

**Sample cleaned:** Yes  No

**Mask:** Yes  No

\_\_\_\_\_  
Date & Signature

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**Internal only**

\_\_\_\_\_  
Debited

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature