

PCT ENQUIRY FORM

In order for us to provide you with relevant information or a quotation, please fill out the questionnaire below so that we can respond to you as quickly and accurately as possible.

Personal Information

Date:

Company or Organization Name:

First & Last Name:

Position:

Email:

Telephone:

Billing Address:

Shipping Address:

Applications and Needs

What type of samples do you work with? *i.e. tissues, cells, purified, proteins, etc.*

What are your primary applications?

i.e. biomarker discovery, Mass Spec analysis, peptide mapping, protein refolding, etc.

What is your downstream analysis?

What is your current method of sample preparation?

What is the desired temperature for your applications?

Please select the heating/cooling functions that are necessary for your applications.

Our Pressure Cycling Technology products require an air or gas input of at least 110psi.

Please indicate whether your facility has one of following input means.

What is your purchasing time frame?	Immediate Need	Needed for budget or grant
	3 to 6 Months	Just Curious
	6 to 12 Months	

We have many applications for our Pressure Cycling Technology. Would you be interested in learning about any of the following?

Select all that apply.

Protein refolding using high pressure

Applications for LMD or LCM samples

Solubilizing inclusion bodies

Applications for accelerated stability studies

Applications for Formaldehyde Fixed Paraffin

Other

Embedded (FFPE) Samples

Do you currently have a system for laser capture or LMD?

How did you hear about Pressure BioSciences?

Additional comments or questions: