

Inquiry Form: SSCW Smart Surface Culture Ware (Under renewal)

* Required



1 Name *

First Name

Family Name

Middle Name

2. Affiliation *

Name of University / Institution

3. Department*

Faculty & Laboratory / Department

4. Job Title*

5. E-mail address*

6. Telephone No.*

7. SSCW sample/product inquiry:

☆ Type of cells (CSTERM may provide specific culture advice)

1)

2)

3)

☆ Do you have interest to purchase SSCW or test SSCW sample first ?

Yes to purchase SSCW Yes for SSCW sample first No

SSCW price list for overseas will be informed before its launch abroad.

⇒ We will send you shipping info and the estimate including shipping fee.

Shipping address:

Address: 〒

Contact person:

Email & Tel :

8. Other Inquiries on SSCW:

[Please kindly return this form or send PDF to info@csterm.com.](mailto:info@csterm.com)