

REQUEST FORM FOR AUTHENTICATION (Download)

Sir/Madam,

I/would like to get done authentication of enclosed herbarium specimen(s)/crude drug sample (s) from Raw Materials Herbarium & Museum, Delhi (RHMD). Detailed information about the specimen(s)/crude drug sample (s) available with me is given below:

1. Botanical Name (Possible):-----
2. Market/Trade/Local/Hindi/Vernacular name:-----
3. Part of specimen: Root/Rhizome/Stem/Aerial part/Leaves/Flowers/Fruits/Seeds, Bark,etc.-----
4. Date/Season of Collection:-----
5. Place of collection:-----
6. Use (if known)-----
7. Purpose of Authentication-Research/Academic/Trade/Cultivation/Drug preparation, etc.-----

I am enclosing herewith DD (No. & date and amount
in the favour of the Director NISCAIR/Depositing the cash Rs.------(Rs.-----
-----towards the prescribed charges for authentication of -----(No.) Herbarium Specimen and/or
------(No.) Crude Drug samples.

Signature

Name:
Address:
Phone, Mobile No.:
E-mail ID:

SEND TO:

Dr. (Mrs) Sunita Garg
Head
Raw Materials Herbarium & Museum, Delhi (RHMD)
National Institute of Science Communication And Information Resources (CSIR-NISCAIR)
Dr. K. S. Krishnan Marg (inside Pusa campus)
New Delhi-110012
E-mail: sunitag@niscair.res.in; sunita.niscair@gmail.com; rhmd@niscair.res.in;
Phone: 011-25846301-7, Ext. 258, 263; 25846001 (Direct)