



Government of Kerala

Common Facility Service Centre

Test Application Form

Name	:	
Address	:	
Phone No: / Email ID	:	
Type of Test	:	
Number of Samples	:	
Mode of Result : Direct Result//Post/E-mail/Whatsapp	:	

Place :

Sd:

Date :

Name :

(For Office use only)

Testing Fees

Amount Received

Receipt No.

Date

Cash Section

F/030/101

Receipt

Sample Code

No. Of Samples

Sample Date

Result Date

Section

Common Facility Service Centre

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