

Site Requirements

Biotage® V-10 Touch

Dear Valued Customer,

The following document will assist you in the preparation of your laboratory for a successful installation of Biotage® V-10 Touch Evaporator System. Please read and sign where indicated at the end of this document. Your signature validates that you have understood our requirements. We cannot guarantee a complete installation or demonstration if the requirements are not met. If you have any questions please don't hesitate to contact Biotage® 1-Point support™.

Customer Responsibility

Make sure your site meets this specification, including: the necessary ventilation, space, electric outlets and gases, tubing required for the successful installation of the instrument. Users of the instrument should be present throughout the installation and familiarization services; otherwise, they will miss important operational, maintenance and safety information.

If you have any questions or concerns, please feel free to contact us.

Best Regards,

1-Point Support



Biotage 1-Point Support™

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Site Requirements

Environmental

A chemical fume hood, or canopy, with an air flow rate of 80 CFM is highly recommended when combined with the Gilson Liquid Handler. However, it is the user's responsibility to confirm the suitability of their application with the Safety Regulations of their facility.

Temperature 18–32 °C

Humidity 20% to 90% RH (non-condensing)

Space Requirements (Dimensions)

V-10 Touch Evaporator System

Width 24.5" (620 mm)
Depth 22.5" (570 mm)
Height 23.0" (585 mm)
Weight 110 lbs (50 kg)

You must leave a minimum distance of 4" (100 mm) clearance between the rear, sides, and top of the system and any solid objects.

Gilson GX-271 Liquid Handler

Width 23.5" (600 mm)
Depth 21.3" (540 mm)
Height 22.5" (570 mm)
Weight 48 lbs (22 kg)

Personal Computer

Width 30" (760 mm)
Depth 24" (610 mm)
Height 18" (460 mm)

Power Requirements

V-10 Evaporator System

1 NEMA 6–15 outlet, 208 to 240 VAC RMS, 50/60Hz, 2100 VA.

Standard 110 V 20 amp (NEMA 5-20) electrical service is appropriate if utilizing the Step up transformer supplied by Biotage.



NEMA 6–15 outlet.

Personal Computer

2 outlets, 110 VAC

Gilson GX-271

1 outlet, 100–120 VAC, 60 Hz, 2.0 A

Required Installation Solvents and Supplies

V-10 Touch Evaporator System

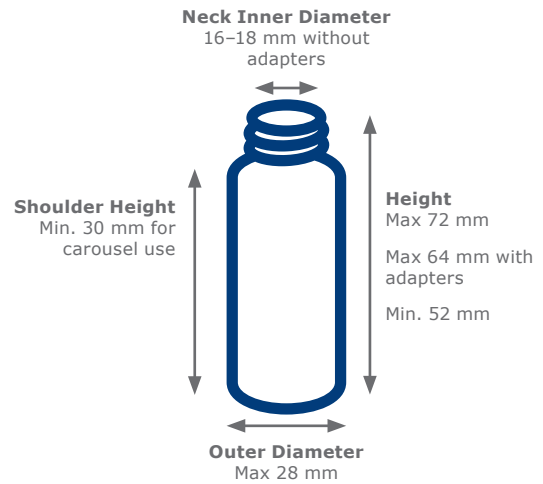
100 mL DI Water, 100 mL Methanol, 250 mL Erlenmeyer Flask, 20 mL Scintillation Vials

Gilson GX-271 Liquid Handler

4 L Bottle for waste or waste carboy. 500–1000 mL solvent bottle. Test Tubes in the size of the racks used

Biotage Recommended Glass Vials

Maximum height (with or without adapters):	72 mm
Maximum height for use with adapters:	64 mm
Minimum height (with or without adapters):	52 mm
Minimum shoulder height for use with carousel:	30 mm
Maximum outer diameter:	28 mm
Neck inner diameter without adapters:	16–18 mm



Training

After the system installation has been completed, the Service Engineer will train up to three users on the basic operation and maintenance of the system. Training will take approximately 2 hours depending on the system configuration.

Facility Sign-off

1-Point Support will schedule the installation of your instrument upon receipt of the completed Facility Sign-off Checklist. All items on this checklist must be completed. Return your checklist as soon as your laboratory is ready and functional for prompt installation of your V-10 Touch Evaporator System.

- Environmental Recommendations
- Space Requirements
- Power Requirements
- Fitting Requirements
- Required Installation Solvent and Supplies

Please enter the following information and sign below:

Facility Name: _____

Customer Name: _____ Phone: _____

Primary Users Attending Training (Name, E-mail Address, Phone Number)

(1) _____

(2) _____

(3) _____

I certify that the preparations required for the installation of a V-10 Touch Evaporator System have been completed and functional as described in the Facility Preparation document. I further acknowledge that if any of these requirements are not ready by the agreed upon installation date and I have not rescheduled the installation, then I will be responsible for any additional costs relating to the installation of the system.

Customer Signature

Date

Please sign and fax, or mail a copy of this page to you regional Biotage 1-Point Support as soon as your laboratory is ready for installation.