

Account No.

Contact Name

Tel. No. E-mail





## Organic Analysis Sample Submission Form

4260	
Your Details (Please submit o	one form for each sample)
	Company
	Address

CC							
Purcha Order							
Sampl Ref. No							
Quote	Ref. N	0.					
				All reports	will be delivered by	email	
Note: F	ailure t	o complete an			Information & vill imply sample is		requires no special treatment
		Sens	sitivities, R	isks & Hazard	s (please tick a	minimum of one	e box)
	Carcinogenic Volatile Hygroscopic Light sensitive			Expl Air sen		azardous Jnknown	
_		, 9					
					nd Handling Re	-	
		ng Required		Air	Vacuum	Temp (°C)	Time (Hours)
		ng Required			le to grind samp	les under an inen	t atmosphere)
	Handle under dry inert atmosphere No special treatment required						
	Analysis	Required?	Expected Value (if known)	Single, Duplicate or Triplicate Analysis	(3, D or 1) Quantity of Sample**	Turn-around Time (standard/ expedited)	Comments, sample description, formula
E.	g. Carbo	n x	75%	D	5mg	standard	
Ca	rbon						
Ну	drogen						
Nit	rogen						
Ох	ygen						
Su	lfur						
N/I	Protein						
TC	C*						
		currently UKAS sample require		e for CHN, O, S, T	OC and N/Protein		
		We are al	ble to provi	de a 24 hr servi	ce for urgent sa	mples <u>by prior arı</u>	rangement.
	Sign	ned			Name	*	

Sign	ed		Na	me*	*if different fro	om the above contac	t name		
	For internal use only:								
	Date Received		For Review	D	eclined	Accepted			

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