**ORDER FORM**

Customer:

|  |  |  |
| --- | --- | --- |
| Click or tap here to enter text. |  | Click or tap here to enter text. |
| Company name/nameClick or tap here to enter text. |  | Street, building number, city, post code Click or tap here to enter text. |
| Reg. nrClick or tap here to enter text. |  | Contact person (and occupation)Click or tap here to enter text. |
| E-mail |  | Phone |
| Information about sample(s):Click or tap here to enter text. |  | Click or tap here to enter text. |
| Name of sample(s) and/or marking (will be featured in test report)Click or tap here to enter text. |  | Storing conditionsClick or tap here to enter text. |
| Date of expiry |  | Amount of sample(s) (g or ml) |
| Order details (analyses to be conducted): |  |  |
| Click or tap here to enter text. |
|  |  |  |
| Language of test report |  | Issuing of test report |
| I guarantee timely payment for analyses. I agree that the laboratory may inform the supervisory bodies of the results in cases that arise from the law.Name and signature (authorized person/board member):…................………………..……....……….…............ |
| Click or tap to enter a date. |  |  |
| Date of sample submissionClick or tap here to enter text. |  | Date of sample acceptance (filled in by lab) |
| Name and signature of the person submitting the sample |  | Name and signature of the person accepting the sample (filled in by lab) |
| State of the sample upon arrival at the laboratory (filled in by lab) |  | Sample code in the lab (filled in by lab) |

*If requested, the customer will organize the collection of samples within two months, otherwise the test objects will be disposed of after the given time has passed.*