

Sample Submission Form

Inorganic Analysis

Your Details (Please submit one form for each sample)

Account No.	Company
Contact Name	
Tel. No.	Address
E-mail	
CC	
Purchase Order No.	
Sample Ref. No.	

Sample Information & Analysis

Note: Failure to complete any of the boxes in this section will imply sample is not hazardous and requires no special treatment

Sensitivities, Risks & Hazards (please tick a minimum of one box)

Carcinogenic	<input type="checkbox"/>	Volatile	<input type="checkbox"/>	Explosive	<input type="checkbox"/>	Not hazardous	<input type="checkbox"/>
Hygroscopic	<input type="checkbox"/>	Light sensitive	<input type="checkbox"/>	Air sensitive	<input type="checkbox"/>	Unknown	<input type="checkbox"/>

Preparation and Handling Required:

Please detail below which elements to measure*:

Sample Structure / formula, general information, etc.

Element* Required	Expected Values (if known)	Element* Required	Expected Values (if known)

Not all methods and elements are accredited by SWEDAC. Please refer to Scope of Accreditation on the Inorganic page of the website

Any further comments:

Please note: duplicate analyses will always be carried out where sufficient sample permits.

Please indicate preferred method(s) of reporting

E-mail

Phone

Post

Signed		Name*	
		*if different from the above contact name	

For internal use only:

Date Received		For Review	<input type="checkbox"/>	Declined	<input type="checkbox"/>	Accepted	<input type="checkbox"/>
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Form ref SampleSubmissionForm_V4.pdf March 2022

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