

# Organic Halogen Analysis Sample Submission Form

**Your Details (Please submit one form for each sample)**

<b>Account No.</b>	<b>Company</b>
<b>Contact Name</b>	
<b>Tel. No.</b>	<b>Address</b>
<b>E-mail</b>	
<b>CC</b>	
<b>Purchase Order No.</b>	
<b>Sample Ref. No.</b>	
<b>Quote Ref. No.</b>	

*All reports will be delivered by email*

**OFC-IC (Halogen) 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"/>		Unknown <input type="checkbox"/>

**Preparation and Handling Required**

Drying Required <input type="checkbox"/>	Vacuum <input type="checkbox"/>	Temp (°C) <input type="checkbox"/>	Time (Hours) <input type="checkbox"/>
Grinding Required <input type="checkbox"/>	(Note – we are unable to grind samples under an inert atmosphere)		
<b>No special treatment required</b> <input type="checkbox"/>			

Analysis	Required?	Expected Value <i>(if known)</i>	Single or Duplicate Analysis <i>(S or D)</i>	Quantity of Sample	Turn-around Time <i>(standard/ expedited)</i>	Comments, sample description, formula
E.g. Bromine	x	75%	D	5mg	standard	
Fluorine						
Chlorine						
Bromine						
Iodine						

<b>Signed</b>		<b>Name*</b>	<small>*if different from the above contact name</small>
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*For internal use only:*

Date Received	For Review	Declined	Accepted
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Elemental Microanalysis Ltd. Hameldown Road, Okehampton Business Park, Exeter Road, Okehampton, Devon EX20 1UB

Tel 0800 024 8250 Or (01837) E-mail [analyst@microanalysis.co.uk](mailto:analyst@microanalysis.co.uk) Web [www.elementallab.co.uk](http://www.elementallab.co.uk)

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