

Sample Submission Form

Inorganic Analysis

Your Details (Please submit one form for each sample)

<p>Account No.</p> <p>Contact Name</p> <p>Tel. no.</p> <p>E-mail:</p> <p>CC:</p> <p>Purchase Order no.</p> <p>Sample Ref. no.</p>	<p>Company</p> <p>Address</p>
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Please do not mark above this line

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 indicate preferred method(s) of reporting

Email

Phone

Post

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

Signed

Name*

*if different from the above contact name

For internal use only:

Date Received	For Review	Declined	Accepted
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