

## General Testing Requisition Form 測試申請表

Applicant's Company Name 公司名稱:

Address 地址:

Contact Person 聯絡人:

電話:

Ext 內線:

Email 電郵:

Fax 傳真:

Invoice to (if different from the above)

發票寄收 (如與上述地址不同):

Sample Description (Name; Manufacturer/Supplier; Country of origin etc) 樣品敘述(例如名稱;製造/供應商;產地)

Quantity 數量:

Sampling Date & Time. 收樣品日期及時間: /

Reference No. 參考號碼:

Supplementary Sheet. 補充資料: No 否/Yes 有: \_\_\_\_\_ Page 頁

If various samples status is different, please specify or state in supplementary sheet. 如果多項樣本儲存狀況不一, 請外加說明或提供補充資料

Sample Original Storage Condition 樣品原有儲存狀況: ☐ Frozen 急凍 ( $\leq -15^{\circ}\text{C}$ ) ☐ Chilled 冷藏 ( $1 - 5^{\circ}\text{C}$ )  
☐ Ambient 常溫 ( $18 - 27^{\circ}\text{C}$ ) ☐ Other 其他 \_\_\_\_\_

Sampling Condition 收樣狀況: ☐ Original pack 原裝 ☐ Sterile container 無菌容器 ☐ Other 其他 \_\_\_\_\_

Sample has been treated with germicide 樣品已經用殺菌劑處理: ☐ No 否 ☐ Yes 有: \_\_\_\_\_

Sample has a past history of contamination 樣品有受污染紀錄: ☐ No 否 ☐ Yes 有: \_\_\_\_\_

Test(s) Required 所需測試服務: ☐ Microbiological 微生物/ ☐ Chemical 化學/ ☐ Physical 物理/ ☐ Other 其他

\* Please indicate test method, if necessary/Refer to Quotation no. :

\* 如適用, 請提供要求測試方法 / 參考報價號: \_\_\_\_\_

Service Required 所需服務: ☐ Regular 標準 ☐ Others, please specify 其它, 請明確說明 \_\_\_\_\_

Return Sample 剩餘樣品送回: ☐ Yes 是 ☐ No 否 Report Delivery Service 報告送遞服務: ☐ Yes 是 ☐ No 否

Re-test Sample 再次測試樣品: ☐ Yes 是 ☐ No 否 If Yes, please specify report no. 是, 請說明報告編號 \_\_\_\_\_

Conclusion Required (if appropriate) 要求結論部份(如適用): ☐ Yes 是 ☐ No 否

**Authorized Signature and Company Chop**

簽署及公司蓋印:

**Date 日期:**

(See general conditions of service printed overleaf 請參閱背頁條款)

**Official Use Only 供本公司用**

Date Received: \_\_\_\_\_ No. of sample: \_\_\_\_\_

Sample condition on arrival:

Committed : ☐ Yes ☐ No, please specify : \_\_\_\_\_

Delivery Temp: \_\_\_\_\_  $^{\circ}\text{C}$

Lab receiving Time: \_\_\_\_\_ Test Starting Time: \_\_\_\_\_

Reviewed by : \_\_\_\_\_ Date : \_\_\_\_\_

\*please tick the item which is appropriate 請在適用項目加 ☒