

# Analysis Request Form

**CUSTOMER INFORMATION**

Request Date: \_\_\_/\_\_\_/\_\_\_

Company Name: \_\_\_\_\_

Requestor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Analysis Request Details**

No. of samples submitted:

Storage Conditions: Ambient  5°C  <-10°C Quality Assurance: FDA  GMP  Other **Description of Analysis Required:**

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**Identification Number**  
(eg. Lot Number, Date)**Description**

1

**INSTRUCTIONS / NOTES**

- Please ensure paperwork matches sample labels prior to submission to ChemicalAnalysis.
- If more than 10 samples are to be submitted, use additional sheets and indicate number of Analysis Request Forms submitted above.
- **Identification Number** is a unique number that provides traceability of analysis performed. If left blank, the request date will be used.
- **Sub Sample Number** is a unique combination of number/letters to differentiate samples with the same identification number. If left blank, sub sample numbers will be automatically assigned as 1,2,3.... etc.
- Samples will be retained for 4 weeks after approval of the final report and then disposed off appropriately, unless otherwise requested.

**CHEMICAL ANALYSIS USE ONLY**

Date &amp; Time received: \_\_\_/\_\_\_/\_\_\_ : \_\_\_\_\_ Initials: \_\_\_\_\_

Sample(s) logged: \_\_\_/\_\_\_/\_\_\_ Initials: \_\_\_\_\_

**Comments:** \_\_\_\_\_

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110 Merrindale Drive, Croydon, Victoria, 3136

Tel: 03 9737 4300 Email: info@chemicalanalysis.com.au  
Fax: 03 9737 4399 Web: www.chemicalanalysis.com.au

**Identification Number**  
(eg Lot No., Date)

**Sample Description**

11	_____	_____
12	_____	_____
13	_____	_____
14	_____	_____
15	_____	_____
16	_____	_____
17	_____	_____
18	_____	_____
19	_____	_____
20	_____	_____
21	_____	_____
22	_____	_____
23	_____	_____
24	_____	_____
25	_____	_____
26	_____	_____
27	_____	_____
28	_____	_____
29	_____	_____
30	_____	_____
31	_____	_____
32	_____	_____
33	_____	_____
34	_____	_____
35	_____	_____
36	_____	_____
37	_____	_____
38	_____	_____
39	_____	_____
40	_____	_____
41	_____	_____
42	_____	_____
43	_____	_____
44	_____	_____
45	_____	_____

**Print**