|  |
| --- |
| Applicant’s Company Name 公司名稱:       |
| Address 地址:       |
| Contact Person 聯絡人:        | Tel 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 / Service Description樣品 / 服務敘述                                                        |
| Test(s) Required 所需測試服務:          \* 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 [ ]  Express加快(40% surcharge附加費)  [ ]  Double Express特快(100% surcharge附加費)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 state previous report no. 是,請提供有關報告編號 :      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: T℃:Committed : Yes No *(if no, please specify)*Lab receiving Time:Reviewed by : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_ |

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