



For internal use

Analysis request form

(Please use only one analysis request form for each type of sample)

Customer information	Hazard labelling of samples, e.g. MSDS, must be attached
Company name	VAT number
Contact	E-mail
Address	Phone
Postal code / City	Order number / PO number (if any)
Billing address (if different from sender)	Quotation number (if any)
E-mail address for electronic invoicing	Express delivery* <input type="checkbox"/> (+ 50%) Standard delivery <input type="checkbox"/>
	Receiving e-mail address for certificates (if different from sender)

* Please contact ALS Odense in advance

Name of sample: _____

Sample will be stored by room temperature unless you checkmark

+80 +20 Desiccator 5°C ± 3°C Light protected

ID / batch no.	Sample amount / Number of units	Method	Specifications / limits

Comments:

Products characteristic: solubility / inhibitory effect (microbiology):

Excess sample material is requested to be returned (against payment)

If the method has previously been validated at ALS Odense (DB Lab) - please provide report no.:

Please send sample to:
ALS Odense
DB Lab A/S
Lille Tornbjerg Vej 24
DK- 5220 Odense
Denmark

Tel +45 65 93 29 20
E-mail: EUODN.Samples@ALSGlobal.com
VAT no: DK73109310