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Test Sample Submission Form

(Please use one submission form per part number – Ship samples to address above)

Company Name:	
Contact Name:	
E-Mail:	
Telephone #:	
PO #:	uote #:
The following information is necessary for test report generation:	
Type of Testing Desired:	,,,
Specification(s):	Spec Rev:
Duration of Test (If Applicable):	
Part Description:	Part Dimensions:
Type of Coating being Tested:	
Number of Samples / Panels for Testing:	Material/Substrate:
Customer Identification:	
(e.g., part#, job#, lot#, tank#, etc.) Customer requirements (if applicable):	
(e.g., No pass/fail, report observations)	
	Masking of Edges and/or Holes Required? ☐ Yes ☐ No
Scribing Required? ☐ Yes ☐ No Scribe Type (if	not in spec, ex: straight line, "X" cut):
Scribe Location (non-panels):	
Orientation or significant surface:	
Photos Required? ☐ Yes ☐ No	
Frequency of Photos:	
Return of Samples Required? Yes No	
UPS or Fed Ex Account No.:	
Interim Test Reports Required? Yes No Individual Test Report Required? Yes No	
Special Instructions:	

Notes: * Any cancelled testing requires written notification; minimum charges/accrued costs shall apply.

- * Any special preparation to test samples not outlined in the specification must be clearly defined.
- * If different lot/batch or product is submitted, its identification must be clearly noted.

Testing shall be to the most recent version of the applicable method, specification, or practice known to this laboratory, unless otherwise directed by the customer. It is the customer's responsibility to ensure that the desired specification and revision level are provided to the laboratory before the start of any testing.

File: Test Sample Submission Form K. Moyer

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