

TEST REQUEST FORM

SERVICE REQUIRED:

REGULAR

(5-7 working days)

Note: Login day not counted as working day.

EXPRESS (40% SURCHARGE)

(3 working days)

Client Information

Company Name: _____
 Address: _____
 Contact Person: _____ Telephone: _____
 Email: _____

LAB USE ONLY

Date Received: _____

Billing Information (for new client / cash sale only)

Invoice to (as above): Yes No (please specify) Contact Person: _____
 Company Name: _____ Telephone: _____
 Address: _____ Email: _____

Sample Information (mandatory)

Sample Description: _____
 Colour: _____ Thickness: _____ Density: _____
 Return Sample: Yes No

AS 4288:2003 – SOFT UNDERLAYS FOR TEXTILE FLOOR COVERING

Test Required (please tick appropriate boxes)

- Underlay Full Test
- Breaking Force & Extension
- Determination of Thickness
- Static Loading
- Dynamic Loading
- Resistance to Breaking & Cracking
- Work of Compression Before Dynamic Loading
- Work of Compression After Dynamic Loading

Other Tests:

- Spillage Test
- Hot Metal Nut
- Density / Weight (gsm)

Other Test / Special Instructions:

Authorised Signature: _____