

Inquiry Form of Request Details

Your name. (Company name)		Inquiry Form No.
Your address	Postal code	Reception stamp /signature
	Your department/section	
	Person in charge	
Tel		Remarks
Fax		
E-mail		

Please fill out the form in the black box above (all required)

【Please be sure to read the Outsourcing Agreement posted on our website before contacting us.】

1. Please inform us of the purpose of your request (to the extent that information can be disclosed)

- Various tests corresponding to BWMS Code (2016G8),
 Corresponding to USCG,
 Corresponding to US-EPA,
 Inspection at installation,
 Others ()

2. Please inform us of the request details (to the extent that information can be disclosed)

Analytical sample name (tentative)

Request details (tentative)

Please provide detailed information about your preferred test dates, test sites, and analysis details here.

Number of samples analyzed (tentative):

3. Others

If you have any other requests, please fill in below.



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