

TEST ORDER FORM

TO : HONG KONG TESTING CO., LTD.

DATE : _____

QUOTATION NO.: _____

QUOTATION DATE: _____

FROM : _____

SITE/SOURCE : _____

Tel. No.: _____

Fax No.: _____

Person to Contact: _____

*Sample Collection : Collected and sampled by HKT / Delivered and sampled by client / or any others,
Description please specify _____

Nature of Samples :

Total No. of samples :

Testing required on sample(s) delivered (please specify test method):

Remarks : Clients should specify clearly in the space below any **additional** information required in the test report.

Please send test report to :

Signature : _____

Name : _____

File Name : TESOFORM.XLS
Form Ref.: TES-ORD-FORM
Revision: 02/01
Form Issue Date : 10 June 2002