



# Request for Laboratory Analysis

Company: \_\_\_\_\_ Purchase Order #: \_\_\_\_\_  
Address: \_\_\_\_\_ Sample Cylinder #: \_\_\_\_\_  
City, State: \_\_\_\_\_ Customer Reference: \_\_\_\_\_  
Zip: \_\_\_\_\_ Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Analysis Requested:

### **Halon 1301** (I/A/W ASTM D5632-01)

Complete Analysis \_\_\_\_\_ Purity \_\_\_\_\_ Moisture \_\_\_\_\_  
Halon Ion (Pass/Fail) \_\_\_\_\_ Residue \_\_\_\_\_ Suspended Matter (Pass/Fail) \_\_\_\_\_  
Acidity \_\_\_\_\_ Non-condensable gases \_\_\_\_\_ (test must be performed on a vapor sample)

### **Halon 1211** (I/A/W ISO 7201-01)

Complete Analysis \_\_\_\_\_ Purity \_\_\_\_\_ Moisture (\_\_\_\_\_)  
Halon Ion (Pass/Fail) \_\_\_\_\_ Residue \_\_\_\_\_ Suspended Matter (Pass/Fail) \_\_\_\_\_  
Acidity \_\_\_\_\_

### **Refrigerants** (I/A/W AHRI 700)

Complete Analysis \_\_\_\_\_ Purity \_\_\_\_\_ Moisture \_\_\_\_\_  
Chloride (Pass/Fail) \_\_\_\_\_ Residue \_\_\_\_\_ Particulates/solids (Pass/Fail) \_\_\_\_\_  
Acidity \_\_\_\_\_ Non-condensable gases \_\_\_\_\_ (test must be performed on a vapor sample)

Comment: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Ship sample and request form to: **RemTec International, 1100 Haskins Rd., Bowling Green, OH 43402, USA, 419-867-8990 Attention: Laboratory**