

Customer Test Request Form

Purchase orders can be emailed or faxed to our lab coordinator (gmendoza@atrona.com) or submitted with the material being tested at ATRONA Test Labs. This may not apply to all customer. If you prefer to have this form filled out by us please call Gina at 815-229-8620.

Client Information		New Client?			
Company Name:				Fax:	
Contact Name:				Shipping Address:	
Title:				Billing Address:	
Phone:				Email:	
Quantity of Samples:					
Samples ID & P/N:					
Material Type/ Grade:					
History / Heat Treat:					
Specification/Requirements: (please list all specifications and revision levels)					
Requested Testing:	Testing Analysis Failure Investigation		Other/Notes:		
Turnaround: (mark box)		Standard		Rush	
				Sample Disposition:	
ATRONA Use Only:		Specifications/Test Requirements Reviewed:		Signature and Date: _____	