

Customer Test Request Form

ATRONA Test Labs, Inc. 5271 Zenith Parkway Loves Park, IL 61111

www.atrona.com

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		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			F		ample isposition:		
ATRONA Use Only: Specifications/Test Requirements Reviewed: Signature and Date:							