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|  | **TEST REQUEST FORM** | **Date**  |
| …./…./20…. |
| **Customer Information** |
| **Customer Name** : | **Contact Name** : |
| **Telephone** : | **Tax Office** : |
| **E-Mail** : | **Tax ID** : |
| **Address** : |
| **Requested Tests** |
| **S.N** | **Identification of the Test Sample** | **Requested Tests and Test Values** | **Quantity** | **Standard No / Clause** |
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| **Would you like to have an accredited report? Yes [ ]  No [ ]**  |
| **Appendix (Technical Drawings etc.)** |
|   |
| **Notes**  |
| The door height of laboratory is 4,4 m, width is 4,3 m.Please send this form to hilkar@hilkar.com  |
| **This part will be filled by the laboratory** |
| **Contract No** |  | **Prepared By** |
| **Estimated Test Duration** |  |
| **Test Beginning Day** |  |
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