

Order request

BioChem Labor für biologische und chemische Analytik GmbH

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BioChem offer-no.:	PO no. client:	project no.:	request date:

Client/recipient of certificate of analysis (test report) <i>(required fields)</i>		different invoice recipient <i>(if applicable)</i>
Company name		
Street, no.		
Postcode, city		
Contact person		
Phone/fax		
Email (test report)		

Special risks:		Other precautions/comments:	
hazardous substance according to Ordinance on Hazardous Substances (GefStoffV). If yes, please add safety data sheet			
none	narcotics	highly effective substance (CMR etc.)	GVO/S2
Storage conditions:	RT	2-8 °C	-20 °C
		protect from light	protect from moisture

Pos.	test item <i>(required field)</i>	batch no. <i>(required field)</i>	quantity e.g. number, volume <i>(required field)</i>	BioChem order no. <i>(for BioChem use only)</i>
1.				for BioChem use only
Analysis to be performed/other information*: <i>required field</i>				
Specification: ☐ Ph. Eur. ☐ USP ☐ acc. to monograph ☐ validation and test specification				
2.				for BioChem use only
Analysis to be performed/other information*: <i>required field</i>				
Specification: ☐ Ph. Eur. ☐ USP ☐ acc. to monograph ☐ validation and test specification				
3.				for BioChem use only
Analysis to be performed/other information*: <i>required field</i>				
Specification: ☐ Ph. Eur. ☐ USP ☐ acc. to monograph ☐ validation and test specification				

*Please fill in other details such as pooling, water content, drying losses (if applicable)

Date/name/signature	<i>required field</i>
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By signing, the undersigned confirms that all information in the required fields is complete

for BioChem use only:	Eingang _____ Kontrolle 1 _____ Kontrolle 2 _____	label for cooled/frozen goods	label for highly effective substances (CMR)
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Comments:
