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| **REQUESTOR** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Name: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | KFMRC ID |  |  |  |  |  |  |
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|  |  |  |  | Country |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Post Code: |  |  |  |  |  |  |
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| **SERVICES** |  |  | **FTIR – Fourier Transform Infra Red** |  | Service Code: | 039.001.001 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Turn Around Time |  | 7 Working Days |  |  |  |  |  |  |  |  | Accessible Results : 30 Days |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Samples Receiving |  | 9:00 am – 12:00 / Working Days  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Hard Copy Documents: 9:00 am – 12:00 / Working Days |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **SAMPLES** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Samples ID |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Samples: |  |  | Standard |  |  |  |  |  |  |  |  |  |  |  | Sample Type |  | Solid |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | Application |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Liquid |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | Standard & Application |  |  |  |  |  |  |  |  |  |  |  |  | Other |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  | Blank sample included |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **SOLVENT:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **HAZARDS:** |  |  | Infectious |  |  | Toxic |  |  | Irritant |  |  | Other (specify) |  | None |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | MSDS Enclosed |  |  |  |  |  |
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| **ANALYSIS:** |  |  |  | % Transmittance |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | Absorbance |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | Other (specify) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | Return Samples within 30 Days |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **STORAGE:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | Dispose Samples  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **DISPOSAL:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **# Sample Delivered**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **# Sample Received** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Name |  |  |  |  |  |  |
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|  | Signature |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Signature |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Time & Date |  / / |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Time & Date |  / / |