



SUBMITTAL FORM: ASTM D 1929 Testing

DATE: _____

TEST(S) REQUESTED:

- ASTM D 1929: Flash Ignition: Temperature _____
- Spontaneous (Self) Ignition
- Flash Ignition & Spontaneous Ignition on one report

- ASTM E 136

PLEASE TEST OUR PRODUCT AT:

- Actual thickness
- Standard test method thickness

DESCRIPTION OF SAMPLE BEING SUBMITTED: *(Describe as completely as possible)*

IS THIS TESTING PART OF A CLAIM ON BEHALF OF A PLAINTIFF OR DEFENDANT? YES; NO

	(1)	(2)	(3)
	COMPANY SUBMITTING SAMPLE	COMPANY TO APPEAR ON REPORT	COMPANY BILLING ADDRESS
Person's Name:			
Company Name:			
Address:			
Telephone #:			
Fax #:			
e-mail:			

Note: Unless otherwise directed by the submitter, test reports will be sent to the company shown in column (1).

SPECIAL INSTRUCTIONS (if any): _____

SEND SAMPLES TO:

THE GOVMARK ORGANIZATION, INC.
 96 ALLEN BOULEVARD, SUITE D
 FARMINGDALE, NY 11735-5626 U.S.A.
 Federal EIN # 11 2237670

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 e-mail: info@govmark.com

Please complete a separate form for each product submitted.