



**SUBMITTAL FORM: Testing of Rugs and/or Floor Mats
With or Without Padding**

Govmark

DATE: _____

TEST(S) REQUESTED: CFR Title 16 Part 1630
 CFR Title 16 Part 1631
 Other: _____

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

CARPET:

Lot No.: _____ Date of Mfg.: _____

Style: _____

Composition: _____

Weight, Density, Thickness, etc.: _____

PADDING:

Lot No.: _____ Date of Mfg.: _____

Style: _____

Composition: _____

Weight, Density, Thickness, etc.: _____

FLOOR MAT:

Lot No.: _____ Date of Mfg.: _____

Style: _____

Composition: _____

Weight, Density, Thickness, etc.: _____

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

Note: Please be sure to clearly mark the face of the material and the warp/machine direction.



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	(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

Tel. +1 631-293-8944
Fax +1 631-293-8956
e-mail: info@govmark.com

Please complete a separate form for each product submitted.