



Govmark

SUBMITTAL FORM: Children's Sleepwear Flammability

FABRIC TEST

DATE: _____

DESCRIPTION OF SAMPLE BEING SUBMITTED: *Please describe product as completely as possible. As a minimum, the below listed categories should be filled in.*

- 1. Fabric Fiber Content: _____
- 2. Fabric Weight: _____ [] oz/yd² [] oz/ly
- 3. Width (inches): _____
- 4. Count: _____
- 5. Fabric Color/Pattern: _____
- 6. Finish: _____
- 7. Fabric Style: _____ (e.g.: Jersey, tricot, flannel, quilt, etc.)
- 8. Number of yards in production lot: _____ (Maximum 5,000 yards)

TEST REQUESTED: CFR Title 16 Parts 1615 & CFR 1616 (FF 3 & FF 5)

[] Test fabric, as received (initial test) [] Test fabric after 50 launderings

* Government regulations require that you retain in your files a 1/2 yard sample adjacent to the piece that you submit for testing.

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 direction.

	(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:

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