**TEST ORDER FORM** (Page 1 of 3)

Please complete a separate form for each product submitted.

**TEST/S REQUESTED:**  ASTM D4966**;**  British Standard: BS 5690**;**  ISO Standard

**MAXIMUM NUMBER OF RUBS:**  20,000;  40,000;  65,000;  Other:

**PRODUCT DESCRIPTION:** *The report that is issued by SGS North America is based on your product description. Please describe your product as completely as possible. Suggested parameters include but are not limited to:*

Style:

Fiber Content:

Finish:

Fabric Weight: \_

Color (for color-oriented tests):

Product End Use:

Additional Information:

**DO YOU REQUIRE YOUR SAMPLES TO BE RETURNED TO YOU:**  **NO;**  **YES** CARRIER:

ACCOUNT #:

**LITIGATION:** We need to know if the test is part of a lawsuit.

**IS THIS TESTING PART OF ANY ACTUAL OR INTENDED LEGAL ACTION, CLAIM, OR SIMILAR ACTION?**  **NO\*;**  **YES**

**\* Failure to answer will be considered “no”.**

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Client Confirmation: We confirm that the above information is complete and understand that the performance of the services described are governed by the SGS General Conditions of Service included found at [**http://www.sgs.com/en/Terms-and-Conditions.aspx**](http://www.sgs.com/en/Terms-and-Conditions.aspx). **INITIALS:**

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**CLIENT’S P.O. #:** Optional. Only required if it is related to the proper processing of our invoice to you for payment.

**SPECIAL INSTRUCTIONS:** *All special instructions contained in your purchase order, such as testing modifications, extra report copies, invoice distribution, etc., must be repeated on this test order form.* *Testing will be conducted as directed by this test order form which supersedes the purchase order.*

**COMPANY DATA:** *Please complete all three columns. Where appropriate, “same” may be entered in Columns 2 and 3.* *Unless otherwise instructed, all reports will be sent to the company identified in Column 1.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **(1)** | **(2)** | **(3)** |
|  | **COMPANY SUBMITTING SAMPLE** | **COMPANY TO APPEAR ON REPORT** | **COMPANY BILLING ADDRESS** |
| Person’s Name: |  |  |  |
| Company Name: |  |  |  |
| Address: |  |  |  |
|  |  |  |  |
| Telephone #: |  |  |  |
| E-mail: |  |  |  |

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|  |
| --- |
| **CLIENT UPDATE (OPTIONAL):**  Existing account;  New account  *In a few words, what brought you to SGS North America?* |

**SEND SAMPLES TO:** **SGS NORTH AMERICA, INC.**

**96 ALLEN BOULEVARD, SUITE D**

**FARMINGDALE, NY 11735 U.S.A.**

**Federal EIN #** **13-3041390**

**Tel. +1 631-293-8944**

**Fax +1 631-293-8956**

**Email: rosemary.billelo@sgs.com**

SAMPLES THAT ARE RECEIVED WITHOUT APPROPRIATE INFORMATION MAY BE DELAYED IN TESTING PENDING RECEIPT OF SUCH INFORMATION.

**The services described herein are governed by the SGS General Conditions of Service. Attention is drawn to the limitation of liability, indemnification, and jurisdiction issues defined therein. Authorization to perform the services, including but not limited to the issuance of a purchase order, shall indicate acceptance of the SGS General Conditions of Service found at** [**http://www.sgs.com/en/Terms-and-Conditions.aspx**](http://www.sgs.com/en/Terms-and-Conditions.aspx)**. Any other terms and conditions, including those identified in Client’s purchase order are expressly rejected, unless otherwise agreed to in writing by an authorized representative of SGS.**

Client Confirmation: We confirm that the above information is complete and understand that the performance of the services described are governed by the SGS General Conditions of Service included found at

[**http://www.sgs.com/en/Terms-and-Conditions.aspx**](http://www.sgs.com/en/Terms-and-Conditions.aspx).

**AUTHORIZED SIGNATURE:** **DATE:**