

micron@micronanalytical.com

Micron Inc 3815 Lancaster Pike Wilmington, DE 19805

INCLUDE WITH SUBMISSION:					
Analysis Request Form	Material Safety Data Sheet (N	ISDS) 1 copy of Purchase Order/Credit Card			
If samples are being shipped separately please include a copy of this Analysis Request Form for Identification. 222 Request Forms are available for download at <u>http://micronanalytical.com</u>					
		CUSTOMER INFORMATION			
Company Name					
Customer Name					
Email Address	Phon	2			
Mailing Address					
City, State, Zip					
*All Invoices will be sent via	Email unless otherwise directed, if	ACCOUNTS PAYABLE contact and applicant are the same please leave contact blank			
Contact Name	Phone				
Email					
Purchase Order/Credit Card # Hard Copy Requ.					
Name on Card					
Billing Zip Code	CCV	Expiration			
Reference Micron Quote	Quot	e Request: Analysis Request: 🗌			

			SAMPLE CI	ASSIFICATION & PRIORITY
Sample Classifications:		Schedule II		Sample Storage:
SIGN:	Non-Scheduled	Schedule IIISchedule IV	DATE:	 Light Sensitive Ambient Refrigerated (2 to 8°C) Freezer (-10 to -25°C)

For Solutions to Material Problems Think Small: Micron Inc MICRON INC. 3815 LANCASTER PIKE, WILMINGTON DE 19805 Phone 302-998-1184 Fax 302-998-1836 https://micronanalytical.com · micron@micronanalytical.com

Analysis Priority:	Please Check All that Apply:	Will you need the Samples Returned?
5 5	How would you prefer to receive all finalized	Yes No
STANDARD	Micron Reports?	
\square 2 Day (1 E y Hourly Data)	All customers will receive a PDF File	If you have a Preferred Ship Account, please
2 Day (1.5 x Hourly Rate)	Paper PDF JPEGs of Opticals	Provide the acct. #: Fed Ex UPS
1 Day (2 x Hourly Rate)	Raw Data	
		Account #

SAMPLE CODE	MATERIAL NAME	ANALYSIS REQUESTED
Please note Samples submitted for FTIR	may not be submitted in plastic sandwich bags c	lue to an inner coating that contaminates samples.

In the following Notes please describe the purpose of analysis and any details you wish to disclose. Sign and date

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