



Sample Submission Form

85 John Road, Canton MA 02021
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Company Name:		Date Sent:		INSTRUCTIONS: 1. Include finished product specifications and ingredient lists when applicable. 2. Send 6 units of each sample for finished products or TAQA. Please contact us for instructions regarding other products. 3. MSDS must accompany samples in "Non-Retail" packaging. 4. When shopping is requested a 30% service charge, based upon the purchase price, will be added to the product and testing cost. Incomplete Submissions Will Effect Turnaround Time.
REPORT TO		INVOICE TO (if different)		
Name:		Name:		
Address:		Address:		
Telephone:		Telephone:		
Fax:		Fax:		
Email:		Email:		
<i>*The signature below, by an authorized company representative, confirms that the company is responsible to pay UL-STR for services performed.</i>				All Submissions from non-US clients require prepayment.
*Authorized Signature Name/Title:		Date:		
Payment Method:		Amount (U.S. \$):		REASON FOR SUBMISSION: Check all that apply <input type="checkbox"/> Comparison to National Brand/TAQA <input type="checkbox"/> Testing to Client Specification <input type="checkbox"/> Other (explain): _____ <input type="checkbox"/> Proposal # _____
Mail Checks with a copy of this form to: P.O. Box 415534, Boston, MA 02241-5534. Please notify your UL-STR contact if check is sent to PO box or place a photocopy with samples				
<input type="checkbox"/> Check Purchase <input type="checkbox"/> Purchase Order # _____ <input type="checkbox"/> Order/Check #: _____ CREDIT CARD: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express				
Credit Card Number:		Expiration Date:		
Name on Card:		Authorization Code:		
<input type="checkbox"/> Standard (10-15 business days) For <u>priority service</u> speak with your UL-STR Contact SAMPLES WILL BE DISCARDED 60 DAYS FROM RECEIVED DATE				
# of Units	Sample Description / Lot Code	Analysis Requested	Special Instructions/Specification	Safety Precautions (None, MSDS attached, Unknown)
_____ Total Number of Samples				

Your UL-STR Contact: _____