

Application Form For Waste Water & Sludge Testing

Earlier Quotation Number Hohenstein:

Applicant

| | |
|---------------------|--|
| Company name | |
| Street, No. | |
| City, Postal code | |
| Country | |
| VAT REG No. | |
| Commercial register | |
| Contact | <input type="checkbox"/> Mr/ <input type="checkbox"/> Ms |
| Surname, Name: | |
| Position: | |
| Phone: | |
| E-Mail: | |

Payer Information (if different to applicant information as above)

| | |
|---------------------|--|
| Company name | |
| Street, No. | |
| City, Postal code | |
| Country | |
| VAT REG No. | |
| Commercial register | |
| Contact | <input type="checkbox"/> Mr/ <input type="checkbox"/> Ms |
| Surname, Name: | |
| Position: | |
| Phone: | |
| E-Mail: | |

Billing Information

| | |
|--------------------------------|--|
| Billing Currency: | <input type="checkbox"/> EUR <input type="checkbox"/> HKD <input type="checkbox"/> USD <input type="checkbox"/> RMB <input type="checkbox"/> Others: |
| Send bill to payer with E-Mail | <input type="checkbox"/> yes (no postal dispatch) <input type="checkbox"/> no |

Sample Information

| | |
|--|--|
| | |
| Sampling Done by | <input type="checkbox"/> Factory <input type="checkbox"/> Hohenstein Staffs <input type="checkbox"/> Others : |
| Sample Type | <input type="checkbox"/> Grab Sampling <input type="checkbox"/> Composite <input type="checkbox"/> Others : |
| Sampling date & Time | Discharge Type : |
| Sampling Location/Description | <input type="checkbox"/> Inlet water (Before Treatment) <input type="checkbox"/> Outlet water (After Treatment) <input type="checkbox"/> Sludge |
| Factory Location | |
| Retest <input type="checkbox"/> no <input type="checkbox"/> yes, please state previous report no.: | |
| Others: | |

| Test Request- Harmful Substances Tests/ Chemical Tests | |
|---|---|
| Test Packages | |
| <input type="checkbox"/> STeP by OEKO-TEX® <input type="checkbox"/> ZDHC <input type="checkbox"/> DETOX To ZERO by OEKO-TEX® | |
| Testing Parameters | |
| <input type="checkbox"/> All | <input type="checkbox"/> Organotin compounds |
| <input type="checkbox"/> Alkylphenoles (AP) and Alkylphenolethoxylates (APEO) | <input type="checkbox"/> Perfluorinated compounds (PFC) |
| <input type="checkbox"/> Allergenic dyestuffs | <input type="checkbox"/> Brominated, Chlorinated and other Flame retardants |
| <input type="checkbox"/> Disperse dyestuffs | <input type="checkbox"/> Phthalates |
| <input type="checkbox"/> Carcinogenic dyestuffs | <input type="checkbox"/> Volatile organic compounds (VOC) |
| <input type="checkbox"/> Arylamines released from AZO dyestuffs or free manner | <input type="checkbox"/> Chlorinated phenoles |
| <input type="checkbox"/> Polycyclic aromatic hydrocarobens (PAHs) | <input type="checkbox"/> Chlorinated and other solvents |
| <input type="checkbox"/> Chlorinated benzenes and toluenes (Carrier) | <input type="checkbox"/> Glycols |
| <input type="checkbox"/> Chlorinated phenoles | <input type="checkbox"/> Heavy metals <input type="checkbox"/> Cd <input type="checkbox"/> Pb <input type="checkbox"/> Hg <input type="checkbox"/> Ni <input type="checkbox"/> Cr <input type="checkbox"/> Cr (vi) <input type="checkbox"/> As <input type="checkbox"/> Cu <input type="checkbox"/> Zn <input type="checkbox"/> Mn <input type="checkbox"/> Sb <input type="checkbox"/> Co <input type="checkbox"/> Total Phosphorus (P) <input type="checkbox"/> B |
| <input type="checkbox"/> short chain chlorinated paraffins (SCCP) and Middle chained chlorinated paraffins (MCCP) | <input type="checkbox"/> Others: |
| Test Request- Conventional Test Parameters | |
| Test Packages | |
| <input type="checkbox"/> STeP by OEKO-TEX® <input type="checkbox"/> ZDHC <input type="checkbox"/> DETOX To ZERO by OEKO-TEX® | |
| Testing Parameters | |
| <input type="checkbox"/> Total Nitrogen <input type="checkbox"/> BOD (As O2) <input type="checkbox"/> AOX (As Cl) <input type="checkbox"/> TOC (As C) <input type="checkbox"/> COD (As O2) <input type="checkbox"/> Conductivity <input type="checkbox"/> Color (Visual) <input type="checkbox"/> Sulphides (As S2) <input type="checkbox"/> pH value <input type="checkbox"/> Ammonia as NH4+ <input type="checkbox"/> Total suspended solid <input type="checkbox"/> Persistent Foam | <input type="checkbox"/> Odor <input type="checkbox"/> Total Mineral Oils (C20-C40) <input type="checkbox"/> Sulfide <input type="checkbox"/> Total Hydrocarbons (C20-C40) <input type="checkbox"/> Max. effluent Temperature <input type="checkbox"/> Color (Spectro photo Meter) (436 ,525,620 nm) |
| Other Tests (Please indicate test method if possible or special request) | |

Order Management

Regular (10 working days)

* If Technically Feasible

Express * (50% surcharge) (5 working days)

Send Report By

E-mail

Postage to:

Comments

Contact Hohenstein

E-Mail: testing_bangladesh@hohenstein.com

Phone: +8801704173600

Date, City

Please confirm your acceptance by authorized Signature & Chop