



ANALYSIS REQUEST

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Client

Name _____

Address _____

Postcode _____

Phone _____ Email _____

Client Reference _____

Additional Client Ref _____

Quote No _____ Order No _____

Primary Contact

Submitted By

Charge To

Results To Reports will be emailed to the Primary Contact by default.
Additional Reports will be sent as specified below

Email Primary Contact Email Submitter

Email Client Email Other _____

Mail Results _____

Office use only: Job No: _____

CHAIN OF CUSTODY RECORD

Sent to Hill Laboratories Date & Time: _____
 Please tick if you require COC to be sent back
 Name: _____
 Signature: _____

Received at Hill Laboratories Date & Time: _____
 Name: _____
 Signature: _____

Condition Temp: _____
 Room Temp Chilled Frozen

Sample and Analysis details checked
 Signature: _____

Priority Low Normal High

Urgent (ASAP, extra charge applies, please contact lab first)

Requested Reporting Date: _____

ADDITIONAL INFORMATION

FORMULATIONS

Sample No:	Product Trade Name	Batch Number	QAC	Amino Alcohols
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Please supply information on the composition of your formulation:

Test Notes: QAC (DDAC & BAC in formulations - Didecyldimethylammonium chloride (DDAC), Benzalkonium Chloride (C12), Benzalkonium Chloride (C14), Benzalkonium Chloride (C16)), **Amino Alcohols** (Amino Alcohols in formulations – Monoethanolamine, N,N-Dimethylethanolamine, Triethanolamine, Morpholine, N,N-Diethylethanolamine, 2-Amino-2-methyl-1-propanol, 1-Methoxy-2-propylamine, Diethanolamine, 3-Methoxypropylamine)