SAMPLE FOR ANALYSIS:

IMO Foam Concentrate Test

SAMPLE REFERENCE NO. (INTERNAL USE ONLY):						
COMPANY NAME:				ORDER REF/P.O. NO.:		
SAMPLE LOCATION:				SAMPLE POINT:		
DATE OF COLLECTION: DD / MM / YY			MANUFACTURER:			
CONCENTRATION: SAMPLE DESCRIPTION/FOAM TYPE:	☐ 1% ☐ 1x1% ☐ AFFF ☐ PROTEIN ☐ OTHER:	☐ 2% ☐ 1x3% ☐ AR-AFFF ☐ FFFP	☐ 3% ☐ 3x3% ☐ FFF ☐ AR-FFFP	☐ 6% ☐ 3x6% ☐ HI-EX ☐ FP	Notes: For each test sample, please provide: 2 litres of Foam Concentrate Please also send with your sample: Foam Testing Request Form Manufacturer's SDS	