

Please return your samples to:

**Oil Technics Foam Testing Services**

Linton Business Park, Gourdon, Aberdeenshire, Scotland UK DD10 0NH

Tel: +44 (0) 1561 361515 Email: info@foamtesting.com Web: foamtesting.com



# Foam Testing Request Form

<b>Customer Name:</b>	ACME LTD	<b>Date:</b>	29th SEPTEMBER 2024
<b>Sample Location:</b>	CITY REFINERY	<b>Quote Ref:</b>	FTS-2024-1234
<b>Company Invoicing Address:</b>	2 HIGH STREET, BOGNOR REGIS BR1 2HS	<b>Order Ref./PO No.:</b>	ACME290924A
		<b>Report Turnaround:</b>	<input checked="" type="checkbox"/> Standard (according to agreement) <input type="checkbox"/> Express.
		<b>SDS included:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Contact Name/s:</b>	A. PERSON	<b>Position:</b>	Technical Supervisor
<b>Report E-mail/s:</b>	a.person@acme-ltd.co.uk	<b>Telephone:</b>	012345 678912
<b>Additional Info/Notes</b>			

No:	Sample Description	Sample Point	Test Required per Sample Point				
<i>Example</i>	<i>1% AFFF, 3x3% AR-AFFF, 2% Hi-Ex</i>	<i>North Tank 1, Helideck Monitor</i>	<i>Please check corresponding box.</i>				
1	3% AFFF-LF	Port Tank	<input checked="" type="checkbox"/> Foam Concentrate	<input checked="" type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
2	3% AFFF-LF	Aft Tank	<input type="checkbox"/> Foam Concentrate	<input checked="" type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
3	1% AFFF-LF	Starboard Tank	<input checked="" type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
4			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
5			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
6			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
7			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
8			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
9			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay
10			<input type="checkbox"/> Foam Concentrate	<input type="checkbox"/> Produced Foam	<input type="checkbox"/> Premix	<input type="checkbox"/> IMO	<input type="checkbox"/> PFAS TOP Assay

*Additional sample table overleaf*