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SUBMISSION FORM – SAMPLE ANALYSIS REQUEST FORM

CONTACT INFORMATION

Company:	
Address:	Invoice Address: (if different)
Contact Person:	Date Submitted:
Email:	Your Reference No:
Tel/Fax:	(Normal/Urgent) Testing:
<p>Please submit 1 kg unground sample or 500 g finely ground homogenous sample in a tightly sealed bag with all identification marks visible on the bag.</p>	

ADDITIONAL SAMPLE INFORMATION (OPTIONAL):

PLEASE FILL UP THE COMPLETE INFORMATION BELOW FOR FOOD EXPORTATION PURPOSES

Brand name:
 Countr(ies) of destination:
 Net consignment weight:
 Quantity of sample received:
 Sample identification number:
 Sample received from (Requester):

ANALYSIS REQUESTED:

1) Mycotoxins

Aflatoxins (LCMSMS/HPLC/ELISA)	T-2 Toxin (A-Tri LCMSMS/ELISA)
Deoxynivalenol (B-Tri LCMSMS/HPLC/ELISA)	Ergot Alkaloids (LCMSMS/HPLC)
Ochratoxin A (LCMSMS/HPLC/ELISA)	Patulin (HPLC)
Fumonisin (LCMSMS/HPLC/ELISA)	Multi-Mycotoxin Analysis 18 (LCMSMS)
Zearalenone (LCMSMS/HPLC/ELISA)	TOP50 (LCMSMS)

2) If additional test is required, please specify:

Others:

TERMS AND CONDITIONS:

Tick here to indicate that you have agreed to the terms in the Decision Rule

Definition for Decision Rule:

Rule that describes how measurement uncertainty is accounted for when stating conformity with a specified requirement)

FOR USE BY ROMER LABS SINGAPORE:

Log-in by:
 Date received at Romer:
 Results due by:
 LIMS Sample ID: SG

Date/Signature _____

