



Romer Labs Food Allergen Centre
 Unit C, The Firs
 Underwood Business Park
 Wells, Somerset, BA5 1AF
 T: +44 1749 68 43 60
 E: romer-fac.lab@dsm.com



SAMPLE SUBMISSION FORM

Please complete the following and enclose with your sample(s)

CUSTOMER DETAILS

Title (Select as applicable):	Prof	Dr	Mr	Miss	Mrs	Ms
Contact Name*:						
Job title:						
Company:						
Address: (Please advise if invoice address is different)						
Tel:						
E-Mail:						

SAMPLE DETAILS

Sample description	Analysis required	Sample(s) contain tannins/polyphenols* (Y/N)	Expected level (if known)	Sample Number (FAC use only)

*Chocolate, Coffee, Cocoa, Chestnut Flour, Buckwheat, Millet and Spices



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Other Information:

Required turnaround time?	2 Working Days	24 hours
How would you like the results reported?	E-Mail	Fax
Have any of the samples been heat treated, processed, hydrolysed? If Yes, please provide brief details i.e. cooking/baking temperatures/Pressure etc.	Yes	No
Would you like the sample(s) returned?	Yes	No
*Please advise if the analytical results are to be reported to any other authorised contact		

Additional sample information e.g. ingredients list/composition:

Purchase order number: _____

For FAC use only

Sample received in a suitable condition for analysis: Yes No

Date/Signature _____