



**Analysis Request Form
Residue Analysis**

Universiti Sains Malaysia, 11800 Minden, Penang, Malaysia...
Tel: (604) 659 5605 Fax: (604) 656 9869

Name: Organisation

Address:

.....

Tel No: Fax No: E-mail:

Request for Analysis

Nature of Sample:

- Food; please specify
- Feed samples; please specify
- Environmental; please specify
- Others; please specify

Analysis Required:

- β -Agonist
- 3-MCPD
- Antibiotic (*please specify*)
- Pesticide (*please specify*)

No of Batches Expected: Date of Arrival:

Number of samples:

The turnaround time for the analysis is 10-14 working days.

It is recommended that samples be collected and transported in polyethylene or polypropylene containers.

Results to be sent to:

Name:

Address:

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Tel: Fax:

E-mail:.....

Invoice to be sent to:

Name:

Address:

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.....

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Tel: Fax:

E-mail:.....

Signature:

Designation:

Date:

FOR OFFICE USE ONLY

Received by:Ref No:Date:

How: Fax Phone E-mail Letter Hand delivered

Confirmation Date: DCC No: