

Date : _____

To :



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

(Attn: Dr. Roziahanim Mahmud)

REQUEST FOR FORMS, SEALS AND STICKERS FOR WORKPLACE SAFETY TESTING

Please provide the following items to us :

Item	Quantity
a) Workplace Safety Testing Form	<input type="text"/>
b) Seals and Stickers	<input type="text"/>

Please note that customers have to bear the transportation costs. The Centre will have to invoice the customer at RM2.00 per set, each containing seals, stickers and chain of custody forms.

Customer mailing address/stamp :

Signature: _____

Designation: _____