

Control: SU-019 Revised: 11/3/2018

2504 W. Park Row Dr. Ste. B5 Box 140, Pantego, TX 76013 P: 1-833-786-6289 E: services@summatesting.com







## **Request for Foam Analysis**

Date:	Type of Credit Card:		
Name:	Name on card:		
Company:	Credit Card #:		
Address:	Expiration date:		
<u>City:</u> <u>State:</u> <u>Zip:</u>	CVV:		
Phone:	Signature:		
E-Mail:			
Method of Payment:	Purchase Order #:		

Concentration	Foam Type	Proportion	Source	Sample #	Description of Product		
Concentrate or Premix	AFFF, FFFP, Hi-Ex, Protein	1%,3%,6%, 3x3%,3x6%	Bladder Tank, Tender	Sample ID	Foam Concentrate, Foam Solution, Sprinkler Anti-Freeze Solution, System water for Proportion Testing, Etc.		

Service AHJ:	NFPA 11	IMO/DNV	Coastguard	<u>UL 162</u>	<u>BS5306</u>	Anti- Freeze	Proportion Test (send system water with Concentrate) (20% Surcharge)	Spreading Coefficient (20% Surcharge)	On-Site Assistance
Check boxes that apply:									

<sup>1)</sup> Fill out table above for samples (one or multiple samples), the more information we have the better. It is recommended that both a sample of the top and bottom of tanks/containers (if possible) is taken to identify any separation issues. Make sure the sample is a good representative of each container that you take, this is the responsibility of the person taking the sample. In order to minimize contamination clean out valves, pipes, and flush out particulates prior to sampling.



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2) Send in this request form, and any supporting documentation (MSDS, SDS, TDS) that you have. Please send samples sealed with electrical tape and in zip locked bag to prevent leaks, and with regards to applicable shipping requirements to: Summa Testing ATTN: Foam Analysis 2504 W. Park Row Dr. Ste. B5 Box 140, Pantego, TX 76013.

## **Additional Information**

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