

## Order Form Consumer Goods

Contracting Entity (Principal):		Street name:	
Contact person:		Post code/city:	
E-Mail address:		Copy to:	
Telephone number:		PO-Number:	
Divergent billing address:			
No.	Article number	Designation (product name)	LOT - No. / ID
1.			
2.			
3.			
General analysis	Product line check	Complaint	Benchmark / Comparison test
This sample is or refers to a / an:			
Offer	Production sample	Returned sample (complaint)	Re-order
<b>Marketability Assessment</b>			
Documentary check Inspection of packaging and labelling		Checking of user instructions (manual) Material testing compliance with legal requirements	
<b>REACH / SVHC Compliance Check</b>			
Material-related SVHC screening		Documentary Check	
<b>Usability Test</b>			
Function test	Verification of product fitness for intended use - basic inspection programme		
Practical test	SQTS Quality Audit Programme (detailed quality inspection) According to specification		
Material resistance	According to specification and/or instruction		
<b>Special Product Testing</b>			
Candle testing Charcoal grill Charcoal		Windscreen cleaner Batteries and rechargeable batteries	
Complaint investigation in consultation with the Principal			
Remarks (commentary):			
Offer requested		Please return sample	
Advice requested			
Assessment basis / Customer requirement:			
Delivery period:	Standard	Deadline:	Date: Signature: