

Form No. F/QP09/01	Quality Control Laboratory, DoF, Dhaka	Issue: 01/11/2020 Version: 0
	Test request form (Feed)	

Name of office/company			
Address			
Contact person details	Name		
	Email		
	Mobile No.		
Sample type	<input type="checkbox"/> Feed	<input type="checkbox"/> Feed ingredients	<input type="checkbox"/> Others
Sample description/temperature (if applicable)	<input type="checkbox"/> Dry (Room temperature)	<input type="checkbox"/> Frozen (< 15 °C)	<input type="checkbox"/> Chilled

Sl. No.	Sample Code	Test required						
		Moisture	Fat	Crude Fibre	Crude protein	Crude Ash	NPN	Chloramphenicol
1.		<input type="checkbox"/>						
2.		<input type="checkbox"/>						
3.		<input type="checkbox"/>						
4.		<input type="checkbox"/>						
5.		<input type="checkbox"/>						
6.		<input type="checkbox"/>						
7.		<input type="checkbox"/>						
8.		<input type="checkbox"/>						
9.		<input type="checkbox"/>						
10.		<input type="checkbox"/>						

Customer signature .....

Date .....

Received by .....

Date .....