TECHNICAL SERVICES REQUEST FORM

We will not accept any linen that has not been washed prior to submission to our lab.

A new sample of the item in question (linen or utensil) should be sent with the problem piece for comparison.

Date: _____

Distributor Service Representative: _____

Distributor: _____

Send Report To: _____

Time Frame: ☐ 2 days ☐ 4 days ☐ 7 days

Via: ☐ Mail_____
☐ Fax_____
☐ E-Mail_____
☐ Phone_____

Distributor Phone: _____

FAX Number: _____

Account Name: _____

Account Contact: _____

Address: _____

City/State/Zip: _____

Tech Service items sent to the lab for analysis are generally not returned. If there are special circumstances requiring return of the items, please indicate here:
Return Sample ◯ No ◯ Yes

Sample Information

Type of Sample:
☐ Water
☐ Laundry
☐ Warewash
☐ Competitive Sample
☐ Other_____

Sample Description:
_____
_____
_____

Approximate Percentag of Linens/Items Effected: _____

Competitive Product Information:
☐ Sample Name_____ ☐ Cost_____
☐ Manufacturer_____
☐ Use Dilution_____
☐ Application_____

Water Conditions

Water Analysis (on site required)

	Hot	Cold
Hardness:		
Iron:		

Confirming Water Sample Enclosed: ☐ Yes ☐ No

Water Softener: ☐ Yes ☐ No

Type of Machine: _____

Machine Capacity: _____

Condition of Equipment: ☐ Good ☐ Fair ☐ Poor

Warewash and Laundry

Fabric Spot Tests (on site required)**

Bleach: ◯ Positive ◯ Negative

Iron: ◯ Positive ◯ Negative

pH: _____

** Tests must be run on wet fabric direct from the washer before the dryer.
NOTE: Be sure to rinse the test reagents out of the fabric before further processing so no fabric damage will occur from testing

Prespotting/Presoaking: _____ **Procedures:** ☐ Good ☐ Fair ☐ Poor

Operation:	Products Used:	Amounts:	Time:	Temperature:

Was Product Feed Checked?
☐ Yes ☐ No

Comments (ie.: Do they overload the machine, does the water softer and water heater consistently work etc.):

_____

_____