



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: _____

Distributor Phone: _____

FAX Number: _____

Time Frame: 2 days 4 days 7 days

Via: Mail _____
 Fax _____
 E-Mail _____
 Phone _____

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

Account Name: _____

Account Contact: _____

Address: _____

City/State/Zip: _____

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)

Hardness:

Hot	Cold
_____	_____

Iron:

_____	_____
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Confirming Water Sample Enclosed: Yes No

Water Softener: Yes No

Type of Machine: _____

Machine Capacity: _____

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

Condition of Equipment: Good Fair Poor

Prespotting/Presoaking: _____

Procedures: Good Fair Poor

Operation: _____ Products Used: _____ Amounts: _____ Time: _____ Temperature: _____

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.):
