Sample submission form

Please complete the fields in the table below with contact details that FertiPro NV should use when there are any unclarities on the human sperm survival assay to perform and/or to communicate assay results to:

Name customer*		Contact person(s)*	
adress details Street + Number*		Email*	
Address Line 2		Telephone	
City + Postal Code*		PO-number or VAT*	
Country*		Invoice details *(if different from the above)*	

Test item is classified as hazardous according to Regulation (EC) No. 1272/2008 (CLP)*

- ○ No
- ○ Yes. In this case, please provide MSDS of the test item with this request form.

Customer agrees that the above and test details provided in the table below are complete and correct:

Date*	
Name*	

* Mandatory fields

Samples can be shipped to:

FertiPro NV
Att Test center
Industriepark Noord 23
8730 Beernem
Belgium

By completing this sample submission form, the customer agrees with the **terms and conditions**.

Please complete the fields in the table below **per test product** that should be human sperm survival assay tested:

Name test item	Lot number test item	Number of items to test	In case of >1 item to test: Indicate if items should be tested individually or pooled?	Storage temperature of test product: • 0-8°C • 15-25°C • Other?	Indicate the exposure duration of the sperm to the (extracted) device: • 1 hour • 4 hours • 24 hours	Acceptance criteria of test item per exposure duration in %	In case of a solid device, extraction required? If yes, extraction duration and conditions (i.e. volume/ temperature)	Remarks/ additional references	**To be completed by FertiPro NV upon sample receipt: Incoming inspection**

print

Save and **send file to Fertipro** (test@fertipro.com)