



RADIOMETRIC AND CHEMICAL ANALYSIS JOB ORDER

CUSTOMER INFO

Date : _____
Company : _____
Address : _____
Applicant : _____
Designation : _____

Job Order Form No. _____
Phone / Fax No. : _____
Email address : _____
Contact person in case of question regarding analysis: _____

APPLICATION DETAILS

Sample Type : _____
Number of Samples : _____
Sample Description : _____

PNRI Code	Sample Description / Client Code
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Analysis Requested :
☐ Elemental analysis by EDXRF
☐ Qualitative (semi quantitative)
☐ Quantitative
☐ Gammametric Analysis
☐ Gross α - β Analysis of Water
☐ Particulate Mass Determination
☐ Vinegar adulteration
☐ Others, please specify _____

Purpose of Analysis :
☐ Export
☐ Regulatory
☐ Research
☐ Others, please specify _____

Miscellaneous :
Samples to be returned? ☐ Yes ☐ No
☐ Certification requested
☐ Attachments included, please specify: _____

Terms and Conditions

- Results of analysis will be released on _____
 - 5 working days for Gammametric analysis
 - 45 days for Gross α - β Analysis of water
 - Or as agreed upon.
- Results will be released only to the customer who entered the job or to an authorized representative upon presentation of written authorization (see reverse side of this form), valid ID, and the official receipt.
- If no complaints regarding the results of the analysis are received within one (1) week after release of certificate, these shall be considered acceptable and samples can be disposed of.
- Certificate of analysis not claimed after 30 days will be disposed of.

- The Institute is implementing CASH PAYMENT POLICY. The services being requested will be provided only upon presentation of the official receipt.

I have read and agreed with all the terms and conditions stated upon and other supplementary provisions regarding special conditions and or agreements.

Date _____ Signature of Applicant / Authorized Representative over Printed Name _____

Approved :

Date _____ PRECIOSA CORAZON B. PABROA, Ph. D.
Laboratory Manager

To be filled up by NATA Lab Staff

Sample Received By : _____ SAR No. : _____
Sample Encoded By : _____

PAYMENT DETAILS:

Cost of Analysis : P _____
Additional Costs : P _____
Total Cost : P _____
OR Number : _____

Letter of Authorization

**To: Philippine Nuclear Research Institute
Nuclear Analytical Techniques Application Laboratory**

This is to authorize Mr./Mrs./Ms. _____ to pick up the original copies of certificates / service analysis reports for the analysis of samples submitted as indicated in the job order, on the reverse side.

Signature of Applicant Over Printed Name

Date: _____

For NATA Lab Staff:

The following documents should be presented:

- ☐ Authorization Letter
- ☐ Valid ID
Type: _____
ID No.: _____
- ☐ Original copy of Official Receipt

Verified by: _____ Date: _____