

TEST REPORT

TEST REPORT NO.

TEST REPORT DATE

NAME OF CUSTOMER	
CUSTOMER ADDRESS	
SAMPLE DESCRIPTION BY CUSTOMER	
STATUS OF SAMPLE	

SAMPLE RECEIVED DATE	TEST STARTING DATE	TEST COMPLETION DATE	TESTING METHOD

TEST RESULTS

SR. NO.	PARAMETERS	UNIT	RESULT OBTAINED	METHOD USED	SPECIFICATION AS PER STANDARD
1					
2					
3					
4					
5					

REMARKS

PREPARED BY

APPROVED BY

LABORATORY – ASSISTANCE

MANAGER