

ANALYSIS REQUEST FORM

Company / Entity Name:		Email:	
Contact person:		Date ____ / ____ / 20__	Tel:
Sample number (for laboratory use only)		Sample nr	
Please select the type of certificate to be issued with an "X" in the space provided			
Certificate of Analysis for Production Purposes		Certificate of Analysis for Export Purposes	
Sample Information			
Sample Type (Flower, Leaves, Oil)			
Sample / Product Description (INN - if available)			
Packaging			
Lot Number / Batch Number			
Seal Condition			
Manufacturing Date			
Expiry Date - for Drug Products			
PO Number for Quote / Invoice			
Analysis Required			
Please tick off the required analysis with an "X" in the space provided			
Quantification of Cannabinoids + Potency		Heavy Metals	
Sample Volume Required: 7 grams		Sample Volume Required: 4 grams	
Turnaround Time: 7 Working days		Turnaround Time: 12 Working days	
Cannabinoid Profile (Raw Flower, Dry Basis)	This space is for Lab use	Mercury (Hg)	This space is for Lab use
Cannabinoid Profile (Raw Flower, Wet Basis)		Lead (Pb)	
Cannabinoid Profile (Other)		Arsenic (As)	
Terpene Profile		Cadmium (Cd)	
Sample Volume Required: 1 gram		Nickel (Ni)	
Turnaround Time: 7 Working days		Zinc (Zn)	
Terpene Profile	This space is for Lab use	Pesticides	
Micro Analysis		Sample Volume Required: 10 grams for all Analyses	
Sample Volume Required: 35 grams for all Analyses		Turnaround Time: 14 Working days	
Turnaround Time: 12 Working days		LC-MS Ph.Eur Pesticides	This space is for Lab use
Total Aerobic Microbial Count	This space is for Lab use	Mycotoxins (Select one option)	
Total Coliform Count		Sample Volume Required: 2 grams	
Total Bile tolerant Gram-Negative Count		Turnaround Time: 7 Working days	
Total Yeast and Moulds		Ochratoxin A Only	This space is for Lab use
Salmonella p/10g		Ochratoxin A & Aflatoxins	
Salmonella p/25g		Other Analysis	
P.aeruginosa		Sample Volume Required: 8 grams for all Analyses	
E.Coli 0-157		Turnaround Time: 7 Working days	
E.Coli		Appearance	This space is for Lab use
Enterobacteriaceae		Identity A	
Listeria	Identity B		
S.aureus	Identity C		
Shigella	Foreign Matter		
	Loss on Drying		
	Ash Residue		
If upon arrival sample is damaged to the extent that the integrity of the sample will be influenced, please indicate how you wish Vinlab to proceed?			
Return the sample	Continue with analysis	Call me to clarify	
For Lab use:			
Sample Weight	Checked in by		
Date	Sign		

**Please note that clients should provide Vinlab with the specifications to reflect on the COA.
Any Information not provided as per this form will be reported as "not indicated" on the COA.
The Expected Turnaround Time for a full COA is 15 Working days.**

By placing of an order or submission of this form you acknowledge that you have read, understood and agree to be bound by Vinlab's standard terms and conditions, found on our website or a copy of which can be requested from accounts@vinlab.com. To the extent that this analysis request form conflicts with or is inconsistent with aforementioned terms and conditions, this analysis request form shall prevail.

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