



TESTMETALS

10605 E 25th Ave. Aurora, CO 80010 | (303) 780-9800 | testmetals.com



Welding Laboratory Submittal Form

Company: _____ Phone No: _____

Billing Address: _____

Shipping Address (if different from billing): _____

A/P Contact: _____ E-mail / Phone: _____

P.O. No: _____ Payment Method: Credit Card Check ACH

Payment Terms & Conditions: CMS accepts the following forms of payments: Cash, Check, Money Order, Cashier's Check. ACH/EFT, VISA, Mastercard and American Express.

New Customer or Company: Payment in advance is required before work begins. Acceptable payment methods include Cash or Credit Card. Customer: Net 30 terms is available after initial job completion, for qualifying work during a six-month period totaling \$2,500 or higher. Company: Net 30 terms is available after initial job completion, for qualifying work totaling \$5,000 or higher.

CMS observes the right to request payment in full upfront and/or decline new testing requests if there is a history of past due/negligent payments. Outstanding invoices of more than 90 days will result in being sent to collections.

INCLUDE ALL INFORMATION NEEDED ON FINAL TEST REPORT:

Material/Condition: _____ Specification(s): _____

Part No: _____ Sample No. _____ Lot FCE Job No: _____

Size(s): _____ Heat Coil No: _____

Reference Info: _____ Other: _____

ATTN: _____ Email: _____

Services Requested (Fill-in or check all that apply)

Welding: Welding Procedure Welder Performance Stress Relief Treating Brazing Procedure

NDE: X-Ray Ultrasonic Testing (UT) Magnetic Particle (MT) Dye/Liquid Penetrant (PT) Visual (VT)

Mechanical: Tensile Test Bend Test Vickers Hardness Profile

Charpy V-Notch Test Temp (Req.) _____ °F °C _____ ft.-lb. J Locations: HAZ Weld Base Metal

Other Testing _____

PHWT: Ramp up Temperature: _____ °F per hour to _____ °F

Hold Temperature: _____ °F for _____ hour

Cool down Temperature: no more than _____ °F per hour in [] closed oven [] open oven

WPS: _____ Material: _____

PQR: _____ Process: _____

Size: _____ Position: _____

Filler: _____ Welder: _____

COMMENTS/SPECIAL INSTRUCTIONS:

Rush Service: **Excludes Failure Analysis**		<input type="checkbox"/> 48 hr. (100% surcharge)	<input type="checkbox"/> 72 hr. (50% surcharge)
Sample Return:	<input type="checkbox"/> No	<input type="checkbox"/> Yes – Ship UPS/FedEx #:	
	<input type="checkbox"/> Yes - Pickup	_____	
<input type="checkbox"/> Ground <input type="checkbox"/> 2-Day <input type="checkbox"/> Next Day			
** For Sample Returns, please include a return label or UPS / FedEx shipping account number and preferred shipping method. **			
Note: Unreturned samples will be held on site for no longer than 90 days after completion of testing before being disposed of.			

Submitted By: _____ Date: _____