**委托检测申请书（激光产品）**

**注意: 所有★均为必填栏**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **★ Applicant:** |  | | | | | | | | | | | | | |
| **★ Address:** |  | | | | | | | | | | | | | |
| **★ 申请(委托)商**： |  | | | | | | | | | | | | | |
| **★ 地址**： |  | | | | | | | | | | | | | |
| **★ Contact Person (联系人):** | | | |  | | | | **★E-mail Address(邮箱地址):** | | | |  | | |
| **Tel (电话):** |  | | | | | **Fax (传真):** | |  | | | **★ Mobile (手机):** | | |  |
| **★ Manufacturer:** |  | | | | | | | | | | | | | |
| **★ Address:** |  | | | | | | | | | | | | | |
| **★ 制造商**： |  | | | | | | | | | | | | | |
| **★ 地址**： |  | | | | | | | | | | | | | |
| **★Contact Person (联系人):** | | | | | | | | **★E-mail Address(邮箱地址):** | | | | | | |
| **Tel (电话):** | | | | | | **Fax (传真):** | | | | | **★Mobile (手机):** | | | |
| **★Payer Name付款公司 (Invoice to 发票抬头): 同申请(委托)商 同制造商 不同于申请公司请注明:** | | | | | | | | | | | | | | |
| **★Payer Address付款公司地址：** | | | | | | | | | | | | | | |
| **★Contact Person付款方联系人：** | | | | | | **★Tel (电话):** | | | | | **★E-mail Address(邮箱地址):** | | | |
| **Report & Invoice Delivered to (If the address is different from the above information)**  报告/发票寄件地址与上不同, 请注明: | | | | | | | | | | | | | | |
| **★Test or approve required (指定测试项目或要求)** | | | | | | | **激光安全等级 激光器（激光光束）性能指标**  **激光产品企业自定非标项目 其他，请说明** | | | | | | | |
| **★Test standard (指定测试标准)** | | | | | | | **GB 7247.1 IEC 60825-1 EN 60825-1 FDA 21CFR1040.10**  **IEC 60825-2 IEC TR 60825-3 IEC TR 60825-8 IEC 60601-2-22**  **GB/T 15175 GJB 5441 JB/T 12632 P2065/D5**  **GB/T 31359 企业自定测试方法 其他，请说明** | | | | | | | |
| **Instructions of deviate from the standard**  **(偏离标准检测方法说明)，如有** | | | | | | |  | | | | | | | |
| **★**Product Description (产品名称): | | | | |  | | | | | **★**Model No. (型号): | | |  | |
| Trade mark (商标): | | | | |  | | | | | **★**Rated voltage (供电额定电压): | | |  | |
| **★**Rated current (供电额定电流): | | | | |  | | | | | **★**Rated power (供电额定功率): | | |  | |
| **★**Laser power(激光模块光功率): | | | | |  | | | | | **★**Wavelength （激光模块波长）: | | |  | |
| **★**Repeat frequency (激光模块重复频率): | | | | |  | | | | | **★**Pulse Width（激光模块脉冲宽度）: | | |  | |
| **★Please provide the laser module specification separately in the form of a file (**另外请单独以文件形式提供激光模块规格书) | | | | | | | | | | | | | | |
| **★Sample quantity and status (样品数量及状态)**  样品数量：   Normal(正常)  Abnormal（异常) 异常情况说明: | | | | | | | | | | | | | | |
| **★Service Required**  **（服务类型）** | | Regular（标准7个工作日）  Express (30% surcharge)（加急5个工作日） | | | | | | | | | | | | |
| Double Express (50% surcharge)（特急3个工作日） | | | | | | | | | | | | |
| **★Report Pick up (取报告方式):**  Self-Pick up (自取)  Express (on Client’s Account) (快件，费用自付) | | | | | | | | | | | | | | |
| **★Sample dealing** (**样品处理方式)** | | | Returned（退回申请商/运费由申请商自付）  On client’s account（自行领回） | | | | | | | | | | | |
| Test samples will normally be retained for maximum period of 3 month and will be destroyed over this period. （本自行处理，测试完成后3个月内未取回样品视同委托本公司自行处理） | | | | | | | | | | | |
| Whether subcontract (是否分包)  Yes（是）  No（否）  Other special note below备注: 其它特殊说明如下: | | | | | | | | | | | | | | |
| Is this application involved in legal proceeding?(If yes, please specify the case)  以上申请是否涉及法律纠纷？ 如果有， 请说明： | | | | | | | | | | | | | | |
| Other special note below备注: 其它特殊说明如下: | | | | | | | | | | | | | | |
| **★**We apply the above tests and agree the above all filled contents.  我们委托做以上测试并声明以上所有填入的内容真实有效  **Authorized Signature and company Chop**  **见“申请信息真实和准确性声明”** | | | | | | | | | Received and Checked by Laboratory 实验室查收: | | | | | |

申请信息真实和准确性声明

为提高在检测认证过程中的时效性和准确性。我司确认以上表中所填写的信息真实、准确。你方实验室可在证书报告中直接使用以上所填写信息。如依照以上所填写信息出具证书报告后，我司仍需修改，则我司愿意为其支付300/次的修改费。特此声明！

声明公司签章：

负责人签名：

声明日期：