

Matrix	Optimal information about the sample received in the sample description
Cleanliness Swab	Cleanliness Swab (Contact Plate):
(Contact Plate)	Sampling point/location:
	Sampling date:
Cleanliness Swab from	Cleanliness Swab
a surface not limited by	Sampling point/location:
a template	Sampling date:
	Sampling surface: not limited by a template
Cleanliness Swab from	Cleanliness Swab
a surface limited by a	Sampling point/location:
template	Sampling date:
	Sampling surface: cm ²
	Information about the sampling surface is required to issue test results.
Agar Plates (Air) –	Agar Plates (Air)
Sedimentation Method	Sampling point/location:
	Sampling date:
	Exposure time: minutes
	Information about the exposure time is required to issue test results.
Agar Plates (Air) –	Agar Plates (Air)
Impaction Method	Sampling point/location:
	Sampling date:
	Volume of sampled air: L
	Information about the volume of sampled air is required to issue test results.
Water	Name/type, product type:
	Sampling point/location:
	Sampling date:
	Sampling time:
	In case of microbiological tests, information about the sampling date and time is
	required to issue test results.
Sewage/rainwater and	Name/type, product type:
rinsing water	Sampling point/location:
Soil/Excavation/Soil	Name/type, product type:
improvement agent	Sampling location:
	Sampling date:
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J.S. HAMILTON POLAND Sp. z o.o.



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District Court Gdańsk - Północ in Gdańsk, VIII Economic Department Share capital: PLN 6 891 700.00 NIP: 0000778120 | REGON: 002893048 | KRS 0000778120



Matrix	Optimal information about the sample received in the sample description
Sediment/Waste	Name/type, product type: Waste code: Sampling location:
	In case of microbiological tests of sediments, information about the sampling date and time is required to issue test results.
Food/Supplement	Product name:
Sample	Batch number: and/or Production date: and/or Expiration date:
	Information about the expiration date is required to issue test results in case of statement of conformity.
Packagings	Product name/type:
	Type of material:
	Print/color: (optional)
Cosmetics and	Product name/type:
chemicals	Lot/Batch number:
	Capacity: (optional)
Gas/ liquid /solid fuels	Name/type, product type:
Waste	Type of packaging:

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