

URBN TEST APPLICATION FORM – HARDGOODS



Division: ☐ Urban Outfitters ☐ Anthropologie ☐ Free People

Company Name :
 Address :
 Contact Person : E mail Address :
 Contact No. : GSTN No. :
 Sample Description : Fax No. :
 Fiber Content / Material : No. of Samples :
 (Metal: Plated/ Unplated)
 Product Type / End use : Colour :
 Order No. : Buyer :
 Style No. : Agent :
 Country of Origin : Supplier :
 Country of Destination : Season :
 Service Required : ☐ Regular (5 – 6 working days) ☐ Express* (3 - 4 working days) ☐ Urgent** (24working hours)
 Method to be used : ☐ AATCC/ASTM ☐ ISO ☐ BS ☐ EN ☐ DIN ☐ Others:

Test(s) Required:

Candle and Candle Accessories

☐ Container Temp test (Candle Size- _____)

☐ Candle Burn Test

☐ Thermal Shock

☐ Effectiveness of Annealing

☐ Products Safety Labels And Warnings

☐ Candle sooting behaviour

☐ Flammability Abuse test

Cookware / Serveware

☐ Capacity Measure

☐ Handle strength – Loaded

☐ Stain resistance

☐ Effects of Handwashing

☐ Dishwasher safe

☐ Microwave Exposure

☐ Oven safe

☐ Thermal shock resistance

☐ BS EN 12983-1

☐ ISO 8442 – 1 & 2

Environmental Tests

☐ Resistance to Corrosion
 (Salt Concentration – 1% or 5 %
 Test Duration – 24 / 48 / 72 or ___Hr.)

☐ Humidity Exposure
 (Temp. _____ & RH _____
 Test Duration - _____Hr)

☐ Heat/Oven Exposure

☐ Cold Exposure

☐ Resistance to Extreme Temp

Other Test

☐ Stability,

☐ Drop test,

☐ Moisture content,

☐ Cross cut adhesion test

☐ Flammability of solids

☐ Bursting Strrength

☐ GSM

Chemical Test

☐ Lead in surface coating

☐ Cadmium in surface coating

☐ Total Lead content

☐ Total Cadmium content

☐ Nickel spot test

☐ Nickel release test

☐ Heavy Metal analysis-ASTMF 963 / EN 71-3

☐ Polycyclic Aromatic Hydrocarbon (PAH)

☐ Reach-SVHC Testing

☐ Azo

☐ Phthalate

☐ Organotin Compounds

☐ Formaldehyde

☐ Flame Retardant

Food Contact Materials (Refer Attached Questionnaire on Page No. 2)

☐ Leachable lead and cadmium

☐ Specific Migration of Heavy metal / Primary Aromatic Amine / BPA

☐ Overall Migration

☐ PCP

☐ Metal Composition

☐ BPA Content

☐ Color Migration

If others, please specify

Sample Return : ☐ Yes ☐ No Report Recipient ☐ Applicant ☐ Payer

Invoice Recipient ☐ Applicant ☐ If other, please provide the following information:

Payer's Name : Contact Person :

E-mail Address : Contact No. :

Billing Address: :

THE ABOVE REQUESTED TESTS ARE SUBJECT TO THE TERMS & CONDITIONS SET FORTH BY THE RESPECTIVE TÜV SÜD LABS.

Authorized Signature / Company Stamp / Date:

Checked & Received by TÜV SÜD / Date & Time:

• For applicable tests only

Samples must be received by 10:30 A.M

Laboratory:

TUV SUD South Asia Pvt Ltd
 373, Udyog Vihar, Phase -II, Sector-20,
 Gurgaon – 122016
 Telephone: +91-124- 6199699
 FAX : +91-124-6199599

Regd. Office:

TUV SÜD South Asia Pvt. Ltd.
 Off. Saki Vihar Road,
 Saki Naka, Andheri (East),
 Mumbai – 400072. India
info@tuv-sud.in

TEST APPLICATION FORM – HARDGOODS (FCM QUESTIONNAIRE)



South Asia

Name			
Address			
Contact person			
Telephone			
E. Mail			
Sample Name		Product type	
Country of origin			
Country of Destination			

Material List (Pl. tick whichever is applicable):

<input type="checkbox"/> Ceramics	<input type="checkbox"/> Adhesives	<input type="checkbox"/> Others 1 (Pl. specify)
<input type="checkbox"/> Glass	<input type="checkbox"/> Paper	<input type="checkbox"/> Others 2 (Pl. specify)
<input type="checkbox"/> Plastics	<input type="checkbox"/> Wood	<input type="checkbox"/> Others 3 (Pl. specify)
<input type="checkbox"/> Polypropylene	<input type="checkbox"/> Silicones	<input type="checkbox"/> Others 4 (Pl. specify)
<input type="checkbox"/> Poly ethylene	<input type="checkbox"/> Ion exchange resins	<input type="checkbox"/> Others 5 (Pl. specify)
<input type="checkbox"/> PVC	<input type="checkbox"/> Metals and alloys	<input type="checkbox"/> Others 6 (Pl. specify)
<input type="checkbox"/> Paper board	<input type="checkbox"/> Rubber	<input type="checkbox"/> Others 7 (Pl. specify)
<input type="checkbox"/> Paper board with wax	<input type="checkbox"/> Cork	<input type="checkbox"/> Others 8 (Pl. specify)
<input type="checkbox"/> Varnishes and coatings	<input type="checkbox"/> Textile	<input type="checkbox"/> Others 9 (Pl. specify)

End use :
(Pl. tick whichever is applicable)

<input type="checkbox"/> Aqueous, non acidic foods	<input type="checkbox"/> Oils, fats and processed dry foods	<input type="checkbox"/> Others 2 (Pl. specify)
<input type="checkbox"/> Aqueous, acidic foods	<input type="checkbox"/> Non acidic foods (High fat & moisture)	<input type="checkbox"/> Others 3 (Pl. specify)
<input type="checkbox"/> Alcoholic beverages less than 10%	<input type="checkbox"/> Acidic foods (High fat & moisture)	<input type="checkbox"/> Others 4 (Pl. specify)
<input type="checkbox"/> Alcoholic beverages above 10%	<input type="checkbox"/> Dry processed food without fat	<input type="checkbox"/> Others 5 (Pl. specify)
<input type="checkbox"/> Others (Pl. specify))	<input type="checkbox"/> Others 1 (Pl. specify)	<input type="checkbox"/> Others 6 (Pl. specify)

Contact time	
Contact temperature	

Regulation:

<input type="checkbox"/> (EC) 10/2011	<input type="checkbox"/> UK	<input type="checkbox"/> Others 2 (Pl. specify) IS 10148
<input type="checkbox"/> Italian decree, 21 Mar 1973	<input type="checkbox"/> USA	<input type="checkbox"/> Others 3 (Pl. specify)
<input type="checkbox"/> Germany, LFGB	<input type="checkbox"/> Others (Pl. specify)	<input type="checkbox"/> Others 4 (Pl. specify)

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