

## **Certificate of Analysis Revision Request Form**

CLIENT INFORMATION							
Company Name:							
Requestor Name & Title:				E-mail:			
Certified Laboratories is committed to providing quality services as well as fulfilling and satisfying all ISO/IEC 17025 requirements.							
According to ISO/IEC 17025 Guidelines Section 7.8.8 we are required to indicate in our Analytical Test Reports all the information requested by the customer, necessary for the interpretation of the test(s) performed. This includes the description of the sample(s) received for testing.							
In reference to the sample description documented on the Analytical Test Report, we ask that you verify by signing and agreeing to this document that the additional or revised description you are providing is a representation of the sample that was submitted for testing.							
Accession/Sample Number(s):							
Revision(s) Reques	ited:						
Reason(s) for Revision(s) Requested:		Lab Error? Yes $\square$ No $\square$ (If yes, forward to QA for Corrective Action Implementation).					
Signature of Requestor:				1	Date:		
FOR LAB USE ONLY							
		Approved □ Not Approved □					
Reviewed By:				Date:			

Reviewed by QA? Yes □ No □ Certified Laboratories DCR# \_\_\_\_\_ (N/A if not applicable)

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