

STABILITY



**Certified Laboratories**

A Certified Group Company

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**STABILITY TESTING – SUBMISSION FORM**

**BUSINESS NAME:**

**PO #:**

**Bill To:**

**Date:**

**Product Category:**

Nutritional Sample ☐ Cosmetic ☐ OTC ☐ Medical Device ☐ Rx ☐ Homeopathic ☐ STORAGE ☐ Other \_\_\_\_\_ ☐  
Chemical ☐ SDS included: Yes ☐ No ☐ Requested ☐ Amazon Submission ☐

New Matrix/ Formulation: Yes ☐ No ☐

Contact Name/ Protocol approver:

Phone:

E-Mail:

Salesperson:

Spec/COA Provided with the shipment ☐

**Note: Stability results are released via Certified Laboratories portal.**

No.	Accession #: (Accession # for Certified Laboratories Use Only)	Product Name	Formula# Product Code# Batch # Lot# (whichever applies)	Package Size	Quantity	Type of Sample: (FG, Bulk, R&D)	Temperature Condition	Intervals	Quote# (Required without service agreement)	PET / Challenge test	
										Yes <input type="checkbox"/>	Intervals: _____
1.										No <input type="checkbox"/>	
2.											
3.											
4.											
5.											

**Attention:**

**Comment:**

**For Certified Laboratories use only:**

Received By/ Date: (Receiving Dept.)

Sample Integrity Check by:

Received By/ Date: (Stability Dept.)

Sample Integrity Check by:

**Note:** Note: All analytical samples need to be validated on FDA requirements. Please note a validation will be performed with a customer request for a specific sample.  
If the acceptable percentage range is not provided for the sample, an "Out of Specification" report cannot be issued.