



# Altamira Instruments

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## SAMPLE TESTING INFORMATION SHEET

Customer Details	
Name of Company	
Address of Company	
Name of Company Representative	
Phone	
Email	

Sample Information		
Type	Metal	
	% Loading	
Weight		
Characteristics		

Type of Analysis	Please Check	Specifics
TPR	<input type="checkbox"/>	
TPO	<input type="checkbox"/>	
Chemisorptions	<input type="checkbox"/>	
TPD	<input type="checkbox"/>	
Other	<input type="checkbox"/>	
If other, please specify		

Detector Type	Please Check
TCD	<input type="checkbox"/>
TCD with MS	<input type="checkbox"/>

Report Type	Please Check
Data Files Only	<input type="checkbox"/>
Short Summary with Data	<input type="checkbox"/>
Formal Report with Data	<input type="checkbox"/>

Additional Information

Please email the form to: [info@altamirainstruments.com](mailto:info@altamirainstruments.com)

Or Fax to: (412) 963 6485