

LABORATORY SUBMISSION FORM

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DATE _____

COMPANY _____
ADDRESS _____

P.O. NO. _____
RELEASE NO. _____
REQUESTOR _____
EMAIL ADDRESS _____

PHONE NO. _____

IF YOU REQUIRE A HARD COPY OF THE TEST REPORT CHECK HERE _____

An electronic copy will always be emailed to you automatically.

COMMERCIAL MASS SPECTRAL ANALYSIS (IGA) TESTING SERVICES

This test is performed using the same test methods as per MIL-STD 883/750, Method 1018 for parts with an internal gas volume of 0.0cc to 100cc. This permits variations to the procedure and/or device test conditions to achieve the best test conditions for the specific client application, process development, R&D material evaluation and failure analysis. All Bio-Medical companies please use this section. *This data is NOT subject to inclusion in the annual retention report to DLA Land and Maritime. All records regarding these tests are confidential.*

_____ Commercial Mass Spectral Analysis (IGA) Testing Services

QTY OF PARTS SUBMITTED _____

STANDARD SERVICE (3 TO 5 WORKING DAYS) _____

PRIORITY SERVICE (1 -2 WORKING DAYS 50% additional charge per order) _____

PASS/FAIL LIMIT _____

PREBAKE TEMPERATURE _____

List primary gases and concentration expected _____

COMMERCIAL MASS SPECTRAL ANALYSIS (IGA) FOR GAS CYLINDERS

This test method quantitatively measures the process sealing gases sampled from sealing chambers and/or gas supply lines using a specially prepared sampling cylinder.

_____ Mass Spectral Analysis (IGA) of gas cylinder List primary gases and concentrations expected _____

MILITARY MASS SPECTRAL ANALYSIS TESTING SERVICES FOR DLA LAND AND MARITIME SUITABILITY DEVICES

Our suitability range: parts with internal gas volume between 0.01cc and 20 cc
We are not accepting QML or QPL parts outside of our suitability range.

This test procedure is used exclusively for testing hermetic devices in accordance with MIL-STD 883 or 750, Test Method 1018 per the conditions of "suitability" status granted by DLA Land and Maritime. No variations are permitted to this procedure or to the device test conditions. All tests performed per this procedure are subject to inclusion in the annual retention report to DLA Land and Maritime and all records regarding these tests are subject to audit and inspection by the US Government. **ALL PARTS OF THE LABORATORY SUITABILITY PROGRAM WILL BE INCLUDED IN OUR RETENTION REPORTING TO DLA LAND AND MARITIME.**

_____ MIL-STD 883-1, METHOD 1018.10 GAS ANALYSIS (pass/fail criteria will be reported for water (5000 ppm or greater) Oxygen (10,000 ppm or greater), Fluorocarbons (50 ppm or greater) and a 15% pressure differential among like units. All parts will be prebaked for 16 to 24 hours @ 100 degree C)

_____ MIL-STD 750-1A w/change 2, METHOD 1018.6 GAS ANALYSIS (pass/fail criteria will be reported for water (5000 ppm or greater) Oxygen (10,000 ppm or greater), Fluorocarbons (50 ppm or greater) and a 15% pressure differential among like units. All parts will be prebaked for 16 to 24 hours @ 100 degree C)

_____ OTHER (MIL-STD 883, Method 1008 special bake)

Quantity of parts submitted _____

_____ Standard Service (3 to 5 working days)

_____ Priority Service (1-2 working days, 50% additional charge per order)

REQUIRED INFORMATION FOR ALL CUSTOMERS

___ TEST ALL UNITS ___ 3 OF 5 TEST (STOP IF 3 PASS, 5 WITH 1 FAIL, STOP IF 2 FAIL)

LID THICKNESS _____ PUNCTURE LOCATION (ATTACH DRAWING OR MARK PARTS)

ESD HANDLING: _____ IS THE PART SEALED UNDER NEGATIVE PRESSURE _____

INTERNAL GAS VOLUME OF PART _____ IS THE PART SEALED IN ROOM AIR _____

DOES THE PART CONTAIN A BATTERY _____ (IF SO SEND DRAWING OF BATTERY LOCATION)

DOES YOUR SAMPLE CONTAIN ANY HAZARDOUS OR EXPLOSIVE MATERIALS? YES ___ NO ___

IF YES, LIST MATERIALS: _____

List primary gases and concentration expected _____

SPECIAL INSTRUCTIONS

PART INFORMATION

(MUST BE COMPLETED, PLEASE USE SEPARATE SHEET IF YOU NEED TO)

PART NO (AS SHOWN ON PART)	DATE CODE	SERIAL NO	MANUFACTURER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Test report will be emailed to you. (provide email address) _____

If you require a hard copy of the test report, please check here _____

RETURN SHIPMENT:

UPS: ___ RED ___ BLUE ___ ORANGE ___ GROUND	ACCOUNT NO: _____
FED-X: ___ PRIORITY-1 ___ STANDARD ___ ECONOMY	ACCOUNT NO: _____
AIRBORNE: ___ OVERNIGHT ___ AFTERNOON ___ 2-DAY	ACCOUNT NO: _____
OTHER: _____	ACCOUNT NO: _____