

LEAK DETECTION SUBMISSION FORM

(Use separate form for each different part type)

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DATE _____

COMPANY _____
ADDRESS _____

P.O. _____

RELEASE NO. _____

BUYER _____

REQUESTOR _____

EMAIL _____

PHONE NO. _____

LEAK TEST:

_____ MIL-STD 750-1A w/chg 2 Method 1071.16: _____ CH1, _____ CH2.

_____ MIL-STD 883-1 Method 1014.17: _____ CH1, _____ CH2, _____ Class S, _____ ClassK

_____ Customer's own test parameters.

_____ Yes _____ No

Does the test deviate from the MIL-STD?

_____ Yes _____ No

Should parts be Helium bombed?

_____ Yes _____ No

Are packages sealed with Helium or Helium mix? If yes, what is the sealing mix? _____

_____ Yes _____ No

Should fluorocarbon leak rate be measured?

_____ Yes _____ No

Does your sample contain any hazardous, radioactive, corrosive, or explosive materials? Please list: _____

_____ Yes _____ No

ESD handling of parts?

_____ Yes _____ No

Individual test reports are required for each part.

VARIABLES:

_____ atm-cc/sec

Equivalent standard leak rate (L).

_____ atm-cc/sec

Pass/fail leak rate for Helium (R1).

_____ cc

Internal volume of package (V).

_____ psia _____ psig

Maximum Bombing pressure (Pe).

_____ hr _____ min

Bomb time (t1).

*note: If the above information is not supplied, or is incorrect, the accuracy of the test, and/or integrity of the package may be compromised.

SPECIAL INSTRUCTIONS:

_____ Quantity of Parts Submitted

PART NO. (As shown on part)

DATE CODE

SERIAL NO.

MANUFACTURER

Return Shipment:

UPS: _____ Red _____ Blue _____ Orange _____ Ground

Account No. _____

FED-X: _____ Priority _____ Standard _____ Economy

Account No. _____

AIRBORNE: _____ Overnight _____ Afternoon _____ 2-Day

Account No. _____

OTHER: _____

Account No. _____