

Jackie McClaskey, Secretary

Governor Sam Brownback

Kansas Metrology Laboratory Customer Submission Form

- This form may be brought/shipped in with scheduled items or emailed to: kda.metrology@ks.gov

Date:	
-------	--

Bill to:	Company Name:			
	Billing Contact:			
	Address:			
	City, State Zip			
	Phone:			
	Email:			
	Purchase Order #:			

Shipping:	How:	Use Carrier <input type="checkbox"/>	Return shipment label included <input type="checkbox"/>	Lab ships (excludes freight, charged in invoice) <input type="checkbox"/>	
		Carrier:			
		Method (e.g. ground, overnight):			
		Account No.:			
		Insure:			
	Company Name:				
	Technical Contact:				
	If different → than Bill to →	Address:			
		City, State Zip			
		Phone:			
	Email:				

Certificate Information:	Certification Period:		
	Assigned to:		
	Company Name:		
	Address:		
	If different → than Bill to →	City, State Zip	

Additional information for mass standards to determine applicable calibration procedures and tolerances:	No. of Weights:	No. of Weights:	
	Class:	Class:	
	Weight Range:	Weight Range:	
	No. of Weights:	No. of Weights:	
	Class:	Class:	
	Weight Range:	Weight Range:	
	No. of Weights:	No. of Weights:	
	Class:	Class:	
	Weight Range:	Weight Range:	