

# Testing Application Form: **AS Method Repulpability Testing**

Request form for repulpability yield assessment according to 'AS 1301.220:2024'.

\* - Mandatory fields

Applicant Details	
Applicant/ Company Name*	
Address*	
Contact Person*	
Telephone*	
Email*	
Payer Details	Payer Details as above? * Yes <input type="checkbox"/> No <input type="checkbox"/> (if no, below must be filled)
Company Name	
Address	
Contact Person	
Telephone	
Email	
Company ABN*	
Sample Details	
Number of Tests Requested*	
Sample Name(s) *	
Sample Reference (To Appear on Report)	
Brief Sample Description* (For Sample Identification)	

Sample Sending Details	Important Notes
Send minimum 200 g of each sample to: LaunchPad Lab 51 East Street Brompton, South Australia, 5007 Label samples with minimum contact name/company and item names. Include a printed version of this form in the package.	Email completed electronic copy of this form to: <a href="mailto:lab.launchpad@detmoldgroup.com">lab.launchpad@detmoldgroup.com</a> Standard testing lead time is 2 weeks from receipt of correctly completed testing request and samples. The testing report will be sent to the Applicant Contact Person. Excess sample will be destructed 30 days after report issue. Lab Contact: <a href="mailto:lab.launchpad@detmoldgroup.com">lab.launchpad@detmoldgroup.com</a>

Payment Options					
Check desired box to indicate the chosen payment method*					
<input type="checkbox"/> <b>Direct Deposit</b>			<input type="checkbox"/> <b>On Account</b>		
To bank details: <b>Bank:</b> Commonwealth Bank of Australia <b>Address:</b> 96 King William St, Adelaide, SA, 5000 <b>BSB:</b> 065 000 <b>Swift:</b> CTBAAU2S <b>Account Name:</b> Detmold Packaging Pty Ltd <b>Account No.:</b> 11935750			<input type="checkbox"/> <b>Existing Account</b> – for existing account customers only OR <input type="checkbox"/> <b>New Account</b> – new account customers will need to complete a 30-day account credit application		
Non-existing customers will need to provide payment, proof of payment or account credit application for results to be released.					
Approval					
By signing below I/we commit to requesting and paying for the above tests and agree that all testing will be carried out subject to LaunchPad's standard testing charges of which I/we have been informed.					
Name*		Signature*		Date*	DD/MM/YY

Internal use only							
PT#		RT# Assigned:		Request Entry	DD/MM/YY	Samples Received	DD/MM/YY
Assigned:				Date		Date	