



Test Request Form: Convection Reflow, Thermal Stress

Company: _____ NTS Quotation Number: _____
 Address: _____ Purchase Order: _____ Date: _____
 City: _____ State: _____ Postal Code: _____ PO Authorized Signature: _____
 Country: _____ Cage Code / MFR# _____

Contact: _____ Phone: _____ Email: _____

Premium Turnaround Time

Note: All premium turnaround times are dependent upon availability. Add the Premium Charge to Purchase Order if Checked

5 Day Turnaround (50%)

3 Day Turnaround (100%)

Next Day Turnaround (200%)*

** Not available on samples that require thermal stress.*

Part Number:	Production Month & Year:	Date Code:
Coupon Serial Numbers:	Lot Numbers:	
	Work Order #	
Board Serial Numbers:		

Testing To Be Performed

Please indicate the specification the samples will be tested to:

IPC-6012	IPC-6013	IPC-6018	J-STD-003	IPC-TM-650 Method 2.6.27
Revision:	Amendment:		(defaulted to latest revision/amendment unless otherwise specified)	
# of Reflow Cycles:	6	4	2	Other
Temperature:	230 °C	260 °C	Other	
ITAR Requirement:	Yes	No		

Additional Instructions / Information

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Final Test Report:

All final test reports are uploaded to [NTS LabInsight](#) for secure customer retrieval. A hard-copy version may be requested at an additional fee.

*** FORM MUST BE SUBMITTED WITH SAMPLES ALONG WITH A HARD COPY OF THE PURCHASE ORDER***