



Test Request Form: Conformal Coating Testing

Company: _____ NTS Facility Preference: Anaheim, CA Baltimore, MD
 Address: _____ NTS Quotation Number: _____
 City: _____ State: _____ Postal Code: _____ Purchase Order: _____ Date: _____
 Country: _____ PO Authorized Signature: _____

Contact: _____ Phone: _____ Email: _____

NOTE: SDS Sheets to be supplied.

Testing To Be Performed

Please indicate the specification sheet samples will be tested to:

IPC-CC-830B, Amendment 1	MIL-I-46058C, Amendment 7	Coating Type:		
Qualification (Column A)	Initial Qualification	Group A	AR	SR
Retention of Qualification (Column B)		Group B	UR	XY
Quality Conformance (Column C)		Group C	ER	

Submission is for DLA monthly/annual retention **-or-** Submission is for customer retainment only **ITAR Requirement:** Yes No

Coating ID	Manufacturer	Lot Number	Shelf Life Manufacturer	Shelf Life Lot Number

Additional Instructions

Special Test Instructions/Comments:

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.

Hard Copy of Final Test Report Requested

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