**ORDER PLACEMENT**

To:
**TZW Prüfstelle Wasser • Wasserwerkstraße 4 • 76137 Karlsruhe**

Please mark with a cross where applicable. A separate order will be placed for the formulation test in advance. After completion of the test, you will receive a letter with the result, whereupon you can create a new order placement (with reference to this formulation) for the corresponding migration or microbiological test. You can send us the order for the formulation by email. Please enclose the order for the test itself directly with the samples together with the information on the manufacturing process.

**Testing**:

|  |  |
| --- | --- |
| [ ]  | **Formulation testing** in advance/ only |
|[ ]  **Migration testing** |[ ]  With extended test duration (31 days) |
|[ ]  Complete test (type test) |[ ]  Surveillance sample (basic requirements) |

**Test regulation:**

|  |
| --- |
|[ ]  **Evaluation criteria for plastics and other organic materials**  |
|  |[ ]  Annex A (Plastics) |[ ]  Annex D (Elastomers) |
|  |[ ]  Annex B (Coatings) |[ ]  Annex E (Thermoplastc elastomers) |
|  |[ ]  Annex C (Lubricants) |  |  |
|[ ]  **Transitional regulation for silicones** |
|[ ]  **Evaluation criteria for enamels and ceramic materials** |
|[ ]  **Enhancement of microbial growth** |
|  |[ ]  DIN EN 16421 |[ ]  DVGW W 270 |
|[ ]  **Evaluation criteria for cementitious materials (DVGW W 347)** |

|  |  |
| --- | --- |
| **Temperature range:** | **Risk based group:** |
| [ ]  | Cold water (23 °C) 🡪 mandatory | [ ]  | P1 (> 10 %) |
| [ ]  | Warm water (60 °C)  | [ ]  | P2 (1 – 10 %) |
| [ ]  | Hot water (85 °C) | [ ]  | P3 (< 1 %) |

**Further testings:**

|  |  |
| --- | --- |
| [ ]  | Assessment of issued reports according to guidelines for compliance with KTW evaluation criteria according to UBA-transitional regulation |
| [ ]  | Granulate testing for GKR List of materials |
| [ ]  | Determination of the chlorine demand |
| [ ]  | Threshold flavour number (TFN) |
| [ ]  | Other: *please enter if applicable* |

**Testing details:**

|  |  |
| --- | --- |
| Ordering Customer(Company name, address) | *[please fill in complete address and name of contact person]* |
| Owner of test report(to whom the report will be issued; company name, address) | *[company name, address]* |
| Invoice address and VAT Reg.-No.  | *[please fill in complete address and VAT-No.]* |
| Purchase order number of customer (if to be stated on the invoice) | *[PO-No., if required by customer]* |
| Exact name of product for which the test report will be issued  | *[product name of part(s) to be tested]* |
| Type of material/ Name of material(Tradename) | *[material producer and his material name* *or (if already existing): KC…]* |
| Owner and name of chemical formulation or existing TZW-reference number after completion of testing (KC…/…) | *[material producer and his material name* *or (if already existing): KC…]* |
| Quantity and dimension of test specimens as well as surface of single part(in cm²) | *[for different parts: please list individually]* |
| Manufacturer / Production site (Company name, address) | *[*Company name and address of production site] |
| Manufacturing process | *[name of manufacturing process]*Discription of manufacturing process [ ]  attached (Annex) |
| Manufacturing date of test specimen | *[manufacturing date]]* |
| Sampling date of test specimen | *[sampling date]* |
| Sampling by | [ ]  Customer*[Sampler in case of sampling by inspection]* |
| DVGW-Reg.-Number in case of surveillance | *[DVGW-Reg.-Nr.]* |
| Remarks | *[Remarks]* |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|   |  |   |  |   |  |   |
| Place, date |  | Name in block letters |  | Signature |  | Company stamp |