

PZ HTL S.A. Daniszewska 4 03-230 Warsaw; Poland tel. +48 22 492 19 00 ext. 34 fax: +48 22 492 19 93 email: HTL.service@corning.com

CORNING

Calibration Form

Date:

PZ HTL S.A. (HTL) is a subsidiary of Corning Incorporated. All ISO 17025 calibration certificates will be issued under the HTL brand and will not contain the Corning logo.

| Bill to (Company name, address): | Customer data for certificate (Company name, address): | | | | |
|---|--|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Contact person (Name, phone no., email): | | | | | |
| | | | | | |
| | | | | | |
| Ship to: | By courier (Shipping to customer): | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Calibration facility: PZ HTL S.A. Calibration Laboratory | Completion date: 10 working days from date the instrument is received | | | | |
| 12 THE S.A. Cambration Euboratory | To working days nom date the instrument is received | | | | |

List of items:

| | Pipet Specification (Piston operated instrument) | | | | Service Levels/Calibration Method |
|------|--|--------|------------|---|-----------------------------------|
| Item | Brand/Pipet Name | Volume | Serial No. | Results/Volumes | Notes |
| 1. | | | | 10 x 3 4 x 3 Other* | |
| 2. | | | | 10 x 3 4 x 3 Other* | |
| 3. | | | | 10 x 3 4 x 3 Other* | |
| 4. | | | | 10 x 3 4 x 3 Other* | |

* Technical capability for specific test to be verified with Laboratory Manager.

Customer confirms acknowledgement of the general conditions of service available at www.htl.pl

Customer signature:

(Company stamp, date, name, and signature)

| Order verified by (Service): | Order approved by (Laboratory): |
|------------------------------|---------------------------------|
| | |
| | |
| (Name, date, and signature) | (Name, date, and signature) |
| | |
| Service Order No.: | Date: |



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Decontamination Form^{*}

| Indicate Substances Handled: | NO | [| YES | Specify Substances: |
|------------------------------------|----|---|-----|---|
| Health-damaging proteins | | / | | |
| Risk group 1/2 biohazardous agents | | / | | |
| Risk group 3/4 biohazardous agents | | / | | Instrument(s) not accepted for service. |
| Health-damaging liquid solutions | | / | | |
| Radioactive substances | | / | | Instrument(s) not accepted for service. |
| Other substances: | | / | | |

I confirm that:

Instruments present no hazard due to contamination by any substances listed above.

Before return, instruments have been carefully cleaned and decontaminated with:

Safety recommendations

*Notice: For the safety of our employees, we ask you to complete this document thoroughly and attach it to the returned instrument(s). By accepting authorization of this document, the user assumes all liability risks which would result from use of contaminated units. We will be unable to process your service request if the instrument is provided without the declaration completed and signed.

Name and signature

Date

Special requests, customer/distributor suggestions