

TERMOPLAM Ltd	Quality Management System	Code FK 6-1
		Version: 01
R. Bulgaria city. Sofia	ORDER For Initial type testing product	Copy: 1
		Pages: 1/1

ORDER №	
DATE:	FOR INITIAL TYPE TESTING PRODUCT
DELEGATOR:	
/company/person name – control delegator /	
TEST/CONTROL OBJECT:	
/ full object/s name which shall be tested /	
OBJECT STATE:	
/state, conditions and production mode and exploitation /	
REQUEST TYPE ACTIVITY:	
ADMISSIBLE INDEXES:	
/ evaluation system, acceptable level, control parameters /	
OBJECTS / control sections / ARE SPECIFIED BY:	
ORDER AND PEOPLE TO BE INFORMED FOR UNSATISFACTORY INTERMEDIATE RESULTS:	
THE REPORT (CERTIFICATE) SHALL BE PREPARED IN TOTAL 2 COPIES – 1 COPY FOR THE DELEGATOR AND 1 COPY FOR TERMOPLAM Ltd.	

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		Version: 01
R. Bulgaria city. Sofia	ORDER For Initial type testing product	Copy: 1
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OTHER OBJECT DATA:

OTHER REQUEST ACTIVITY DATA:

UNIT PRICE:.....

TOTAL PRICE OF THE ACTIVITY:

IBAN OF THE DELEGATOR:..... IBAN OF THE EXECUTANT:.....

VAT № OF THE DELEGATOR: VAT № OF THE EXECUTANT:

* Data in this section shall be filled only with the prior informed and confirmed mutual agreement of both parties - contracting authorities and contractors.

DELEGATOR:

/first name, last name, signature/

EXECUTOR:

/first name, last name, signature/

I RECEIVED PROTOCOL/S/ WITH NUMBERS:

.....

I DO NOT/ I DO HAVE OBJECTIONS REGARDING PERFORMED TEST/CONTROL AND GIVEN RESULTS.

.....
/firs name, last name, signature/

.....
/receiving date/