

## Cosmetics / Toiletries Test Request Form

Company name		Postal address	
Contact name			
Tel			
email		Purchase Order No. (if used)	

### Sample Description(s)

*Please ensure all the details are correct as this information will appear on the test report. Don't forget sample batch numbers etc. if this information is important to you.*

### Tick the tests you need

Total Viable Count (TVC)

*- Usually for a cosmetic product the following is also required -*

Specified Pathogen Testing (SPT)

Absence of  
 - *Staph. aureus*  
 - *Pseudomonas aeruginosa*  
 - *Candida albicans*  
 - *E coli*

*A total of approximately 20 ml or g is required for these tests*

Preservative Efficacy Test (PET or Challenge test)  
Choose which method you prefer

ISO 11930   
*(the default method for most cosmetic products)*

European Pharmacopoeia (EP)

*A total of approximately 150 ml or g is required for these tests*

### Other tests / information