

Refrigerant sample collection form

One completed form per sample. Match the sample ID on the container and form.

Fields marked * are required. Complete the remaining fields wherever applicable.

Company *

Contact *

Email *

Phone *

Company address

Job / purchase order

Refrigerant type *

Sample ID *

Collection date / time *

Job description

System / compressor manufacturer

Model number

Serial number / unit ID

Sample source / collection point

Liquid / vapor sample identification

Source temperature and unit (if required)

Notes / requested testing

Related sample ID (if separate vapor)

RETURN SAMPLES TO

Amalina Technologies
13564 Imperial Hwy, Unit E
Santa Fe Springs, CA 90670

(562) 404-9955
info@amalinatechnologies.com
Use the kit-specific sampling and carrier instructions.