

Address:
SAS hagmann GmbH & Co.KG
Weberstraße 3
D - 72160 Horb am Neckar

Project Manager / Contact

Name:

E-Mail:

Report Recipient:

Company:

Contact:

Address:

Other Addresses:

Report Recipient:

Billing Address

Additional delivery No Yes - Part of Order / Quotation / Order-Nr.

Testing required:

As stated in quotation:

Additions/ Changes:

Sample designation* [will appear so in report]

* Please ensure that the samples are clearly labeled so that they can be correctly processed.

Sample designation

Number Analytical Test

Created	Index	Data	FOR	Page
Date: 12.12.2023 Name: S. Schneiderhan		Word-Datei: M:\QM-Vault\Formblätter Formular-Datei: M:\SAS DMS\Formblatt allgemein	01.7	Page 1 of 2

- Sample Type:**
- Automotive
 - Medical Devices
 - Combined Medicinal Product and Medical Device*
 - Other:

**Combinations of medical devices and medicinal products are of great importance and are subject to a strict approval process. This also requires a chemical characterization of such products, which we will perform at SAS hagmann GmbH & Co. KG. The health and safety of our employees is very important to us, which is why we ask you to do the following:*

If you send us pharmaceutical-coated medical devices for analysis, please label them accordingly!

Identification of the substance in the combined Medicinal Product/ Medical Device

Substance:

Regulatory requirements *:

- Good Lab Practice (GLP) Good Manufacturing Practice (GMP)

***Please Note:**

Compliance with these regulatory guidelines requires increased processing time and higher costs.

Report Specifications:

Language German English

If test results exceed limit values, is additional information required? no yes, relevant limit values:

Created	Index	Data	FOR	Page
Date: 12.12.2023 Name: S. Schneiderhan		Word-Datei: M:\QM-Vault\Formblätter Formular-Datei: M:\SAS DMS\Formblatt allgemein	01.7	Page 2 of 2