(*full name of the Certified Reference Material-CRM*)

|  |
| --- |
| **Information about the** **user of the CRM:** |
| Name and address:  | VAT:       |
| Contact person:E-mail: | Phone:Fax:  |
| **Information about the customer:** (in the case that is different from the user): |
| Name and address: | VAT:  |
| Contact person:E-mail: | Phone:Fax:  |

|  |
| --- |
| **Information** **on the** **CRM:** |
| CRM code (from DMDM Catalogue of Services)\* | Requested number of CRMs |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
| CRM-s intended use:  |  |

 \**number of rows as needed*

|  |  |
| --- | --- |
| **Specific** **user** **requirements** |  |
| Request for new CRM not listed in the DMDM Catalogue of Services: [ ]  YES [ ]  NO |  |
| Description of new requested CRM, certified value, measurement uncertainty:  Calibration Certificate will be issued in: [ ] Serbian [ ]  Serbian/English |  |  |
| Returning of the CRM packaging: [ ]  YES [ ]  NO |  |

|  |  |
| --- | --- |
| Place and date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | Person responsible: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**ENTERED BY LABORATORY**

|  |
| --- |
| **Review of request:** |
| The request is adequate | [ ]  YES | [ ]  NO |  |
| The request is subsequently amended | [ ]  YES | [ ]  NO |
| Calibration in scope of CMC | [ ]  YES | [ ]  NO |
| Calibration in scope of accreditation | [ ]  YES | [ ]  NO |
| Laboratory can meet a requirements | [ ]  YES | [ ]  NO | [ ]  PARTIALLY |

Planned end date of activity

Date and signature of person responsible for review of request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_