Custom Quotation/Order for Passive Samplers

Please complete appropriate numbered sections of this specification form and send to your SKC representative:

1. **Type of Order**: (Please check one)
   - ❑ New order for custom passive samplers
   - ❑ Repeat order (Previous SKC CPM # _______________________ )

2. **Passive Sampler type**:  
   - ___ SKC VOC Chek 575 Series  
   - ___ SKC UME X Series  
   - ___ SKC 690 Series  
   - ______________________________ other

3. **Sorbent type**:  
   - ______________________________________________________________

4. **Sorbent preparation or treatment**:  
   - ______________________________________________________________

   **Note**: Any sorbent supplied by customer must be accompanied by a SDS sheet.

5. **Purchasing Terms and Authorization**:

   **Notes**: Price quotes are typically provided within 5 to 7 business days. Expedited service may be available. Call 800-752-8472 (1-724-941-9701). Sorbent weights are subject to a ± 10% variation.

   **Terms**: Purchase orders for custom passive samplers must be accompanied by this form. Purchase orders may not be changed or cancelled after they are received by SKC Inc. **Custom order passive samplers are not returnable**. See the SKC Limited Warranty and Return Policy at [http://www.skcinc.com/warranty.asp](http://www.skcinc.com/warranty.asp).

   SKC reserves the right to cancel this order if it is determined that SKC cannot produce a quality sampler according to the specifications provided.

   **Authorization**: The signature of the undersigned confirms that the specifications supplied on form 9563, Revision 1610 are correct and agrees to the custom order terms.

Name (please print or type) ____________________________________________________________

Signature ___________________________________________ Date ____________________________

Company Name __________________________________________

Contact Telephone Number __________________________ Email __________________________

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**Please check one:**  
Quotation _______ Order _______