



Philippine Nuclear Research Institute
Nuclear Services & Training Division
RADIATION PROTECTION SERVICES

Ref. CODE _____

SERVICE REQUEST FOR SWIPE SAMPLES COUNTING & ANALYSIS

Samples to be collected by:

- ☐ CLIENT (SWIPE SAMPLE ANALYSIS)
☐ RPSS PERSONNEL (LEAK TESTING)

I. Client Information

Company Name: _____

Address: _____

Name of Applicant: _____ Date: _____

Designation: _____ Phone/Fax: _____

Contact Person: _____ E-mail Address: _____
(regarding the test)

II. Details of Services Requested

Number of Sources _____

Isotope	Isotope SN	Type of Equipment	Equipment Model	Equipment SN

Payment (to be filled by RPS Staff)

Cost of Analysis: P _____

OR Number _____

Date _____

III. TERMS & CONDITIONS

1. The client shall provide the transportation from PNRI to the site and accommodations, if necessary (as applicable).
2. The client shall make sure that the source/s to be leak tested is/are ready on the agreed date of schedule (as applicable).
3. *Three to five* swipe samples per unit source will be accepted/collected.
4. Swipe samples should be appropriately labeled, radionuclide identified and accompanied by a sampling location diagram.
5. The Certificate of Swipe Sampling Count will be released 10 working days upon receipt of sample/s, and only to the person who applied for the service or to any authorized representative.
6. If there are no complaints regarding the results of the swipe samples one week upon release of certificates, they shall be considered acceptable and the swipe samples will be disposed of.
7. The Institute is implementing a CASH PAYMENT POLICY. The services being requested will be provided only upon presentation of the official receipt

I have read and agreed with all the terms and conditions stated upon and other supplementary provisions regarding special conditions and/or agreement

Signature of Applicant

Date

Received by