

FOR NEW CLIENT ONLY

## جابتن فرخدمتن ساءينتيفيك DEPARTMENT OF SCIENTIFIC SERVICES

MINISTRY OF HEALTH

3. I understand that the Department of Scientific Services shall ensure the protection of my confidential information and proprietary rights.

# MIC(F)—S03 Swab and Air Monitoring Receiving Form

Tel.No.: 2382424

Fax No.: 2381946

Commonwealth Drive, Jalan Menteri Besar, Berakas BB3910 Negara Brunei Darussalam.

FOR RECEIVING STAFF ONLY				
Lab Ref.:	Name:	Initial:	Date:	Time:
				AM / PM*
1. I hereby declared that the inf	formation(s) below is/are correct.			
2. I hereby have read and under	rstood the Receiving procedures for food, water, swab, pharmace	utical and cosmetic samples by	government agencies (M	IIC(P)-001) and Rejection
Procedure for food, water, pl	harmaceutical and cosmetic samples (MIC(P)-003) by Microbiolog	gy Section, DSS.		

Company's Name 8	& Address:				
Client's ID:	Client's Ref.:	Sender's Name:	Signature:	Date:	Time:
DSS-C					AM / PM*

Sample Ref. No.	Sample Description Origin / Place of	Origin / Place of Sampling	ampling Quantity	Sampling			*Sample	*Test(s) Requested		
		Oligin / Flace of Sampling	Quantity	Date	*Time		Condition	resits, nequested		Jica
						AM	Ambient	SA	SAL	TPC
						PM	Chilled	YM	Others:	
							Frozen	YIVI		
						AM	Ambient	SA	SAL	TPC
						PM	Chilled	VM	Othora	
							Frozen	YM	Others:	
						AM	Ambient	SA	SAL	TPC
						Chilled PM	Chilled PM			1
							Frozen	YM	Others:	
						AM	Ambient	SA	SAL	TPC
						PM	Chilled		Others:	
						FIVI	Frozen	YM	Others.	

\*Please circle



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				Date	* Time	Condition	resits) nequested		
					AM	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	_
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	_
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	
					АМ	Ambient Chilled	SA	SAL	TPC
					PM	Frozen	YM	Others:	

\*Please circle