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 Accredited laboratory according to ISO 170252



SUBMISSION FORM – ALLERGEN ANALYSIS

CONTACT INFORMATION

Name:	
Address:	Invoice Address: (if different)
Contact Person:	
Email:	
Tel/Fax:	PO number:

I hereby give my consent for the analysis report to be sent to the following recipients (Email address):

ALLERGEN ANALYSIS with ELISA

- | | |
|-------------------------------------|---------------------------------|
| 30001015 Egg white | 30001031 Walnut |
| 30001047 Whole egg | 30001033 Hazelnut |
| 30001017 Milk | 30001035 Almond |
| 30001022 Gluten (with G12 Antibody) | 30001037 β -Lactoglobulin |
| 30001021 Gluten (with R5 Antibody) | 30001040 Mustard |
| 30001024 Casein | 30001041 Lupin* |
| 30001023 Pistachio | 30001043 Sesame |
| 30001049 Cashew* | 30001045 Fish* |
| 30001027 Soy | 30001046 Crustacea* |
| 30001029 Peanut | 30001091 Macadamia |

* not accredited

ALLERGEN ANALYSIS with LATERAL FLOW DEVICE

Allergen

ANALYSIS with HPLC

30000807 Lactose by HPLC

SAMPLE INFORMATION

Sample Name	Matrix	Urgent*

These samples could possibly contain a high concentration of allergens.

* Express analysis, **only after consultation and for a surcharge.**

Please submit at least 100 g of a representative sample!

Date/Signature _____