

PIENO TYRIMAI, UAB Register of Legal Entities Code 233816290 Radvilų dvaro str. 31, LT48331 KAUNAS, Lithuania Phone 8 37 361181, fax 8 37 361312 www.pieno-tyrimai.lt E-mail: info@pieno-tyrimai.lt

RAW MILK ANALYSIS

Order form

Customer		Phone number	
Address		E-mail	
Sample type		Payer/Customer and	
(e.g. raw cow milk)		invoice recipient*	
Description of the sample		Date of sampling (time, temperature,	
(number of samples,		where necessary)	
quantity of sample,			
sample ID, preservative, etc.)		Dispatched date	
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Method of payment: ⊠ (tick)	contract 🗆] cash □	bank transfer
Tests/Parameters Required:			
Test results to be presented with the expanded uncertainty**:	T YEST INOT I		
Test method:	Selected by UAB Pieno tyrimai Specified by the customer		
Comments, additional information:			
Test protocol shall be delivered:	in person 🗆	by e-mail □	by post □
First name, last name, signature of			
person delivering the sample(s)***:			
Information about the received samples and their test results is not published without a written consent of the customer except for cases stipulated by the laws			
** – expanded uncertainty of measurements may be presented only for quantitative test methods included in the scope of accreditation (the relevant scope of accreditation is available at www.pieno-tyrimai.lt)			
*** – I have been familiarised with the information on the personal data processing below.			
INFORMATION ON PERSONAL DATA PROCESSING			
1. My personal data is processed by the controller – UAB Pieno tyrimai (legal entity's code 233816290, address – Radvilų Dvaro g. 31,			
Kaunas). 2. My personal data – first name, last name, address, e-mail, telephone number – are not transferred to any data recipients, except for			
the cases stipulated by the laws where such transfer would be conditioned by the laws or the binding decision of the court or any other authority.			
3. The rights of data subject are established in Section 3 of the General Data Protection Regulation.			
* - data for receiving an electronic TAX invoice (on request):			
Payer : Company name / Name, Surnan	ne		
Company code			
Address			
VAT payer code			
E-mail (for receiving TAX invoice):			