



Optical Property Measurements Order Form

Date Submitted								
Company Name								
Primary Contact Name		Alternate Co	Alternate Contact Name					
Shipping Address								
City	State	Zip Code	Country					
Phone	Fax	E-mail Addre	ess					
Billing Address (if dif	ferent)							
Purchase Order Nun	nber		Invoice E-mail Address					
A PURCHA	SE ORDE	R OR CREDI	T CARD M	UST BE (ON FILE A	T THE STAR	T OF EACH TEST	
Number of Specimens: Number of Control Specimens:								
Specimen Sizes	S :							
Specimen Desc	ription:							
Specimen Code	es (attach sl	neet if necess	ary):					
Optical Prop	erties	Transmittance:] UV 🗌	Visible	□ NIR	Solar		
	□ F	Reflectance:]UV 🗌	Visible	□ NIR	Solar		
Total Emittance								
SRI Calculation								
	•	Haze 🗌	Clarity					
Shading Coefficient								

UPS Fed Ex Yellow Freight

Other

☐ Ship to: DSET Laboratories Attention: Erika Wunderlich 45601 N. 47th Ave. Phoenix, AZ 85087-7042 Phone: (623) 465-7356

Return Shipping Carrier: