

E-mail: info@keycom.co.jp

Please send E-mail after filling the form below.

Request for Quotation for Contract Testing

Date: dd/mm/yy

Desirable deadline of submitting Quotation :

Corresponding Person: _____

Name of your company and department: _____

e-mail: _____

TEL: _____

1. Name, Number, Size of Sample

Name of Sample:

Numbers of samples:

Sample size:

2. Measurement Items

3. Measurement conditions

* Please write down required measurement conditions e.g., frequency, temperature etc.

4. Necessity of sample returning: Necessary / NOT necessary

5. Desirable deadline of performing measurement:

Keycom Corp.

3-40-2 Minami-Otsuka, Toshima-ku, Tokyo, Japan, 170-0005

Tel 03-5950-3101, Fax 03-5950-3380, and E-mail info@keycom.co.jp

HomePage: <https://www.keycom.co.jp/index-e.htm>