Vartest Laboratories

Quality Assurance & Compliance Testing
Utilizing Textile & Related Technologies

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REQUEST FOR RETRO REFLECTIVE TAPE TESTING (for HVSA)

CLIENT: _____ DATE SUBMITTED: _____ Click To Insert Date

ADDRESS: _____

_____

ATTENTION: _____

PHONE: _____

FAX: _____

EMAIL: _____

QA# / DEPT#: _____

ORDER# / PO#: _____

FED EX/UPS#: _____

Turn time depends on the number of laundry and dry cleaning cycles requested. Standard Request - 10 Business Days.

We require a 2" wide roll, 75-100 ft in length.

CHECK ONE OF THE FOLLOWING SERVICE TYPES:

☐ EMAIL REPORT ☐ FAX REPORT ☐ DISCARD SAMPLES

☐ RETURN SAMPLES

CHARGES AUTHORIZED BY: _____ DIGITAL OR WRITTEN SIGNATURE

SAMPLE DESCRIPTION (HIGHLIGHTED FIELDS ARE WEBSITE SORT FIELDS):

NAME: _____ COLOR: _____

STYLE: _____ SEASON: _____

QUALITY: _____ MANUFACTURER: _____

LOT: _____ CONTENT/OTHER: _____

TRIM TYPE: ☐ **Beaded** ☐ **Prismatic** **Tape Width:** _____

REFERENCE STANDARD:

☐ **ANSI/ISEA 107 - 2015**
☐ **AS/NZS 1906.4 - 2010**
☐ **CSA Z96 - 2015**
☐ **ISO 20471 - 2013**
☐ **NFPA 1971 - 2013, Section 8.45.4**

STANDARD TESTS

RETROREFLECTIVITY:	☐ **As Received** ☐ **After Treatments (Abrasion, Flexing, Cold Fold, Temperature Variation, Laundering, Dry Cleaning, During Rain Fall)** **Please indicate the number of cycles and/or temperature for the below tests** ☐ **ISO 6330 - 2012 Method 6N _____ cycles** **Drying Procedure:_____** ☐ **Dry-Cleaning ISO 3175-2: _____ cycles**
CHROMATICITY on Combined Performance Retro Reflective Tapes. (e.g. Fl. Yellow, Fl. Orange, Fl. Red)	☐ **As Received** ☐ **After Xenon Light Exposure**

SPECIAL INSTRUCTIONS:

NOTE: REMOVE ANY PROTECTIVE FILMS FROM TAPES PRIOR TO SUBMISSION AND/OR MOUNT TO FABRIC AS REQUIRED.