



Sample Submittal Form – DWR & Other Treatments

Minimum Sample Size	Production: 300g Research: 500g each treated & untreated. Bedding: 1 product Apparel: Enough pieces to yield 300g down	<input type="checkbox"/> Return Sample <small>(Shipping & handling charges apply)</small>	Send Reports by: <small>(Hardcopy is extra Fee)</small>	<input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Hardcopy
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Client Agreement attached – Required for new clients. **Detailed Client Info Page attached – Required if payer is different or information will not fit below**

Client Testing Protocol attached – IDFL will follow for testing

Applicant Contact Person	Email Report to	
Applicant Company		

SAMPLE IDENTIFICATION / DESCRIPTION			EXPECTED VALUES		
Sample ID – Treated Material	Sample ID – Untreated Material	Origin		Shake Minutes	
		Style #			
		PO #			
		Destination			

RUSH SERVICE	SPECIAL INSTRUCTIONS / OTHER TESTS	* PLEASE SIGN BELOW
Days are <u>Business days.</u> <i>RUSH Not available on all tests</i> <input type="checkbox"/> Same Day <input type="checkbox"/> 3-Day <input type="checkbox"/> 1-Day <input type="checkbox"/> 5-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> 8-10 Days		By submitting samples to IDFL, Client agrees to IDFL Terms & Conditions at www.idfl.com _____ Sample Prepared by Date

For DWR Research, IDFL recommends testing both treated & untreated down.
 The Core Tests help how treatment affects down filling performance.
 Same-day: Shake, Water Weight, Absorption. (Min 7 days for other tests)

<h3>PRODUCTION DWR</h3> <p><i>Use this section for testing production bulk down or finished products.</i></p> <p><input type="checkbox"/> DWR TEST PACKAGE <i>(See DWR below for details)</i></p> <p><input type="checkbox"/> SELECT INDIVIDUAL DWR TESTS <i>(choose from DWR tests at right)</i></p> <p><input type="checkbox"/> CORE TEST PACKAGE <i>(See Core Package below)</i></p> <p><input type="checkbox"/> SELECT INDIVIDUAL CORE TESTS <i>(choose from tests at right)</i></p> <hr/> <h3>RESEARCH DWR</h3> <p><i>Use this section for research testing & evaluation of DWR treated material.</i></p> <p><i>IDFL recommends that both treated and untreated down be tested and compared when evaluating new DWR treated materials.</i></p> <p><input type="checkbox"/> Test Treated Material only <input type="checkbox"/> Test Treated & Untreated Material</p> <p><input type="checkbox"/> DWR TEST PACKAGE: <i>Includes these DWR Tests</i> - Hydrophobic Shake - Added Water Weight - Water Absorption (EN 13543) - Laundry Durability (Hydrophobic Shake & Fill Power after washing)</p> <p><input type="checkbox"/> SELECT INDIVIDUAL DWR TESTS <i>(choose from tests at right)</i></p> <p><input type="checkbox"/> CORE TEST PACKAGE: <i>Includes: Visual Tests +</i> - Content* - Fat & Oil - Species - Moisture - Oxygen - Odor - Turbidity - Fill Power* *Select Test standards at right</p> <p><input type="checkbox"/> SELECT INDIVIDUAL CORE TESTS <i>(choose from tests at right)</i></p>	<h3>INDIVIDUAL DWR TESTS</h3> <p><input type="checkbox"/> Hydrophobic Shake** (select options below)</p> <p><input type="checkbox"/> Added Water Weight</p> <p><input type="checkbox"/> Water Absorption (EN 13543)</p> <p><input type="checkbox"/> Laundry Durability*** (select options below)</p> <p><input type="checkbox"/> Dry Time – machine dry</p> <p><input type="checkbox"/> Dry Time – air dry</p> <p><input type="checkbox"/> Humidity Aversion</p> <p>**Hydrophobic Shake Options</p> <p><input type="checkbox"/> Shake max 60 minutes</p> <p><input type="checkbox"/> Shake max _____ minutes</p> <p><input type="checkbox"/> Shake until complete saturation <i>(Rating 1 is saturation)</i></p> <p>***Laundry Durability Options</p> <p><u>Test after multiple washes</u></p> <p><input type="checkbox"/> Hydrophobic Shake</p> <p><input type="checkbox"/> Fill Power</p> <p><input type="checkbox"/> Synthetic Loft Retention (Fill Power)</p> <p><input type="checkbox"/> Added Water Weight</p> <p><input type="checkbox"/> EN Water Absorption</p> <p><u># of Washes:</u></p> <p><input type="checkbox"/> After 5 & 10 washes (Standard)</p> <p><input type="checkbox"/> After _____ & _____ washes</p> <p><input type="checkbox"/> After _____ washes</p> <hr/> <h3>OTHER TREATMENTS</h3> <p><input type="checkbox"/> Anti-Microbial</p> <p><input type="checkbox"/> Heat Retention</p> <p><input type="checkbox"/> Other Treatments</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> SELECT CORE TESTS <i>(choose from tests at right)</i></p>	<h3>CORE TESTS</h3> <div style="background-color: yellow; padding: 5px; margin-bottom: 5px;"> CHOOSE STANDARD <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> EUROPE</td> <td><input type="checkbox"/> CHINA</td> </tr> <tr> <td><input type="checkbox"/> JAPAN</td> <td><input type="checkbox"/> QB/T 1193 Quilts</td> </tr> <tr> <td><input type="checkbox"/> KOREA</td> <td><input type="checkbox"/> QB/T 1194 Mattress</td> </tr> <tr> <td><input type="checkbox"/> CANADA</td> <td><input type="checkbox"/> QB/T 1195 Sleeping Bag</td> </tr> <tr> <td><input type="checkbox"/> AUSTRALIA</td> <td><input type="checkbox"/> QB/T 1196 Pillows</td> </tr> <tr> <td><input type="checkbox"/> TAIWAN</td> <td><input type="checkbox"/> GB/T 14272 Jackets</td> </tr> <tr> <td><input type="checkbox"/> USA</td> <td><input type="checkbox"/> GB/T 10288 Bulk Down</td> </tr> <tr> <td><input type="checkbox"/> IDFB</td> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> GLOBAL (Composite)</td> <td></td> </tr> </table> </div> <p><input type="checkbox"/> CORE TEST PACKAGE</p> <p>INDIVIDUAL TESTS</p> <p><input type="checkbox"/> Physical/Visual Evaluation</p> <p><input type="checkbox"/> Content Analysis</p> <p><input type="checkbox"/> Species Identification</p> <p><input type="checkbox"/> Oxygen Number</p> <p><input type="checkbox"/> Turbidity</p> <p><input type="checkbox"/> Fat and Oil</p> <p><input type="checkbox"/> Moisture Content</p> <p><input type="checkbox"/> Odor Evaluation</p> <p><input type="checkbox"/> Fill Power</p> <p><input type="checkbox"/> pH Value</p> <p><input type="checkbox"/> Dust Evaluation</p> <p><input type="checkbox"/> Polyester / Down</p> <p><input type="checkbox"/> Isotope (Origin)</p> <p><input type="checkbox"/> Color</p> <p><input type="checkbox"/> Other Down Tests <i>(Attach Down & Feather Form)</i></p> <p><input type="checkbox"/> Other Synthetic Tests <i>(Attach Synthetic Fill Form)</i></p>	<input type="checkbox"/> EUROPE	<input type="checkbox"/> CHINA	<input type="checkbox"/> JAPAN	<input type="checkbox"/> QB/T 1193 Quilts	<input type="checkbox"/> KOREA	<input type="checkbox"/> QB/T 1194 Mattress	<input type="checkbox"/> CANADA	<input type="checkbox"/> QB/T 1195 Sleeping Bag	<input type="checkbox"/> AUSTRALIA	<input type="checkbox"/> QB/T 1196 Pillows	<input type="checkbox"/> TAIWAN	<input type="checkbox"/> GB/T 14272 Jackets	<input type="checkbox"/> USA	<input type="checkbox"/> GB/T 10288 Bulk Down	<input type="checkbox"/> IDFB	<input type="checkbox"/> Other _____	<input type="checkbox"/> GLOBAL (Composite)	
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DETAILED CLIENT INFO

(USE with any IDFL Sample Submittal Form)

Instructions

<ol style="list-style-type: none"> 1. When to use this form? <ul style="list-style-type: none"> - more information is needed for samples - payer is different than applicant - many report recipients - client address, contacts, etc have changed 2. New clients must also fill out Client Agreement Form 3. Contact IDFL for any questions 4. Please include a copy of SSF form with each sample. 5. See On-line Sample Submittal Form at www.idfl.com <p><i>Multiple sample test forms may be used with a single Detailed Client Info Form</i></p>	
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APPLICANT CLIENT INFORMATION	
Client Company Name	
Choose one:	<input type="checkbox"/> Use standard client info for sample(s) <input type="checkbox"/> Use client info below for sample(s)
Company Street Address	
Company City, State, Country	
Main Telephone	Main Fax
Client Contact Name	
Client Email	
Send Reports to <input type="checkbox"/> Applicant (listed below) <input type="checkbox"/> Payer	

Payer Information	
Payer Company Name	
Choose One:	<input type="checkbox"/> Use account info on file for payment <input type="checkbox"/> Use accounting info below for payment.
Payer Street Address	
Payer City, State, Country	
Payer Telephone	Payer Fax
Payer Contact Name	
Payer Email	
Send invoice to <input type="checkbox"/> Applicant <input type="checkbox"/> Payer	

EMAIL REPORT TO ALL LISTED BELOW

Contact Name	Title	Telephone	Email Address

- Client Instructions or Client Testing Protocol are also Attached
 See Special Client Instructions below

FACTORY INFORMATION	
NOTE	<i>Information about factory that sends sample (if different from applicant)</i>
Factory Name for this Sample	
Factory Street Address	
Factory City, State, Country	
Factory Main Telephone	Main Fax
Factory Contact Name	
Factory Contact Email	
Other Information	

RETAILER, BRAND-NAME, ETC	
NOTE:	<i>This is important if the retailer or brand have specific testing protocols with IDFL.</i>
Company Name	
Street Address	
City, State, Country	
Telephone	Fax
Contact Name	
Email	
Other Information	