

CUSTOMER REQUEST FORM

Date of Request	13/08/2026	Request ID	ENQ0016
Company Name	Madhav Agro Foods Pvt Ltd		
Address	Block No: 31/1, 32/2, 65, 66/A/3, Kurali, Ganpatpura Road. Vadodara 391240 ,Gujarat		
Contact No.	9727578009 / 6358218834	Fax No.	-
Email	fenilbp@mdvagr.com	Contact Person	Fenil Patel
Designation & Department	Q.A Manager	Shipping Agency & Airway Bill No.	

Scope Of Contract

#	Sample Name	Batch No/ID	Test Method	Test Parameter	Specification (if any)	Size/Unit	No. Of Samples	Remarks
1	Frozen Sample	1234	ISO 6579-1:2017	Salmonella	Absent/25g	/25g	250g	-

NOTE:
 • Samples of Fresh Perishable, Refrigerated or ready-to-eat food shall be transported in a thermocol box with dry ice at temp between 1°C - 4°C. • Prior intimation should be given for sending the samples back. Samples will be tested as per the test method/standard and conditions specified by the customer.

Customer Name: Madhav Agro Foods Pvt Ltd

Customer Signature:

NOTE : PLEASE USE ADDITIONAL NUMBERS / SHEETS IF REQUIRED.

For Laboratory Use

Received By:

Sign & Date: