

Administrative Data:

Company:

Contact person:

Address:

Zip code and city:

Country:

E-mail:

Phone:

Customer number:

VAT number:

If VAT number is not available: Please submit your business certificate (certificate of entrepreneurial status). Only with a certificate we can invoice without VAT and accept your order.

Do you want us to send the samples back? yes no

In case that samples shall be shipped back, please arrange a pick-up at TIM by your preferred transport forwarder from the day you receive our invoice. Used samples will be destroyed 14 days after testing unless explicit order to return them at your expense is placed.

For statistical and for quality safety reasons each HME type will be tested minimum three times per condition. If you want to test one HME type with one defined condition, you have to send us minimum **four samples** (one for reserve, if a test failed).

We have prepared four different forms for you and your testing quotation:

- Form 1: According to the standard (adult)
- Form 2: Based on the standard (neonatal/pediatric)
- Form 3: Individual tests (adult)
- Form 4: Individual tests (neonatal/pediatric)

Please choose the form you need and fill out as many forms as you have types of HME or breathing filters, you want us to test.

Important note:

This is a non-binding offer. Prices and feasibility are subject to change and can only be confirmed by TIM GmbH after a thorough examination.

If the delivery address differs from the billing address, please inform us by e-mail.

