



REPUBLIC OF TURKEY  
MINISTRY OF ENERGY AND NATURAL RESOURCES  
GENERAL DIRECTORATE OF MINERAL RESEARCH AND EXPLORATION

Department of Mineral Analysis and Technology  
Çukurambar Mahallesi Dumlupınar Bulvarı No:11 06530 Çankaya/ANKARA  
Contact Tel : 0312 201 16 95 / 201 17 53 www.mta.gov.tr  
Fax : 0312 287 54 09 numune@mta.gov.tr

MTA
Application No.
<sup>a</sup> NATT No.

### ANALYSIS/TEST APPLICATION FORM

#### CUSTOMER INFORMATION (To Be Filled in by The Applicant)

##### Information for Analysis/Test Report (Customer)

Person (Name Surname)

or :

Company/Institution (Name)

Address :

Telephone :

Fax :

e-mail :

##### Invoice Information (The person to be invoiced on behalf of)

Tick if it is the same as the Customer information.

Person (Name Surname)

or :

Company/Institution (Name)

Address :

Tax Office/Tax No. :

TR Identity No. :

Invoice Delivery : by Hand by Mail

Analysis/Test Report Delivery : by Hand by Mail by e-mail

#### SAMPLE INFORMATION (To Be Filled in by The Applicant)

Date of Sampling :

Number of Samples :

Sample Type : Soil Rock Natural Stone  
Coal Water Processed  
Core Other : .....

Water Sample : Acidic Acid Free

Seal Status : Sealed Unsealed

Seal Number :

Sample Delivery : by Hand by Cargo by Mail

(When sending the sample by cargo or mail, the receipt and the application form must be sent with it.)

Remarks (Other information to be specified, if any) :

I hereby declare and undertake that the analyses/tests requested in the sample(s) delivered to your institution will be made in accordance with the procedure/conditions in the Analysis/Test and Calibration Service Catalog published on the MTA website, and I kindly submit for the necessary matters.

Date of Application :

Applicant Name Surname :

Signature

SAMPLE REGISTRATION NO.  
(To be filled in by MTA.)

SAMPLE SIGN  
(To be filled in by the applicant.)

REQUESTED ANALYSIS/TEST CODE/NAME  
(To be filled in by the applicant.)

#### SAMPLE ACCEPTANCE INFORMATION (To be filled in by MTA. )

Sample(s) Acceptance Status : Accepted Conditionally Accepted

Reason For Conditionally Accepted :

Fee :

Payment Document No. :

The Lab. Where The Sample(s) Sent :

Coordinator Lab. :

Sample Acceptance Date : Signature

Person in Charge of Sample Acceptance :

#### BANK ACCOUNTS OF MTA GENERAL DIRECTORATE DEPARTMENT OF STRATEGY DEVELOPMENT

T.C. HALK BANKASI  
Bahçelievler Branch - Branch Code: 0210 Account No.: 0210 0500 0606  
IBAN : TR25 0001 2009 2100 0005 0006 06

T.C. ZİRAAT BANKASI  
Ankara Public Institutional Branch Code: 1745 Account No.: 3771 1957 5001  
IBAN TR55 0001 0017 4537 7119 5750 01

Sample Acceptance Unit Contact: Tel: 0312 201 16 95 / 201 17 53 Fax: 0312 287 54 09 e-mail: numune@mta.gov.tr