**VINCE. SERVICE REQUEST FORM – Inspections**

**Email request to:**

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| **VINCE. Requesting SGS Inspection Service** | |
| Client Company Name: | PO # for SGS: |
| Bill To Address & Contact (Invoice): | Ship To Address (Report): □ same as billing address |
| Contact Name: | Contact Name: |
| Telephone: | Telephone: |
| Fax: | Fax: |
| E-Mail: | ***Report Distribution E-mail***: |

**Service Location Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant Name: | | | |
| Service Location (For Approval & Access): | | Contact Name:  Email:  Telephone:  Cell; | |
| **Product Information** | | | |
| Product / Sample Description: | | | |
| Style/SKU# and Quantity/Color Breakdown (example; *STYLE XYZ – 2,400pcs (600 x 4 Colors)*) | | | |
| Requested Execution Date: | | | Requested Report Sent Date: |
| No. Cartons: | PO # : | |  |
| ANSI Sampling Level: **II** | AQL; Critical **0** Major **2.5** Minor **2.5** | | Scope: |

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| **SGS Service(s) Required** *(double click to check the appropriate Box)*  **Final Random Inspection**  **Fabric Inspection**  4 Point System  10 Point System |

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| **Documents Enclosed** | | | |
| Written Authorization to enter premises | | Inspection Guidelines, Defect Classification, Spec | |
| Reporting Templates | | Prepay (credit card, corp. check, wire transfer) | |
| Audit Form/Checklist | | PO Copies | |
| Audit Guidelines | | Approved sample:      Other: | |
| Corporate Policy (ies) | | Garment Specs | |
| **Authorization To Release Report To Other Parties** | | Ticketing & Packing Instructions | |
|  | |  | |
| **SGS Client Services:** |  | **SGS Salesperson:** |  |

**Client Confirmation:** We confirm that the above information is complete and agree to SGS terms and conditions (attached).

**Authorized Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**



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