



RM 8642a - FDA Saxitoxin Dihydrochloride Solution Customer Request Form

RM 8642a is a test kit that contains small quantities of the dihydrochloride form of a select toxin regulated by the United States Department of Health and Human Services 42 CFR Part 73. In order to complete your request for RM 8642a, this form must be completed, documenting the intended use of the material.

Please complete the following information and email this form along with your completed purchase order to srminfo@nist.gov. Your request will be fulfilled once your information has been reviewed and approved.

Principal Investigator (PI) Information

Company/Organization:	Address:	
Contact Name:		
Email Address:		
Telephone Number:	City:	State/Province:
Fax Number:	Country:	Postal Code:

Billing Information Click here if same as PI Information.	Shipping Information Check if same as PI Information.
Purchase Order Number:	Check if same as Billing Information.
Number of units of RM 8642a requested:	

Company/Organization: Address: City: State/Province: Country: Postal Code: Contact Name: Email Address: Telephone Number: Fax Number:	Company/Organization: Address: City: State/Province: Country: Postal Code: Contact Name: Email Address: Telephone Number: Fax Number:
--	--

Please indicate your intended use(s) of RM 8642a (check all that apply).

Method Validation Research Regulatory Purposes Resale

Other. Please explain:

By checking this box, I attest that this purchase is intended for only the intended use(s) described above, and that I will not transfer this material to others outside my direct supervision without documentation of my own due diligence in compliance with HHS 42 CFR Part 73.

FOR NIST INTERNAL USE ONLY

Office of Reference Materials

Approved? Yes No	Reviewer:	NIST Sales Order Number:
--------------------------------------	-----------	--------------------------