



INTERNATIONAL (UK) LIMITED

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Fit test booking confirmation form

Please complete details of your fit testing attendees and return this form to the branch you have booked before the testing is carried out.

Please ensure candidates are clean shaven on the day, do not smoke or drink coffee 2hrs before the test.

Company Name :			
Customer Contact :			
Purchase Order Number :			
Length of Expiry required on cert. (Please tick)	1 Year	2 Years	3 Years

Candidate Name	Mask to be tested on	Date of Test	Time of Test

Authorised by : Position in Company :

Authorisation Signature Date

