

LMATS Pty Ltd
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RAIL TEST REQUEST

Date:		Purchase Order Number:	
Company Name:			
Address:			
Contact Name:		Email:	
Phone No:	FAX No:	Mobile:	
Job Details			
Testing Specification/s:			
Project Name:			
Project Location:		Weld Process:	
Rail Size (AS 1085.1):		Qualification Type:	
Rail Type:		Welding Machine:	
Quenching:		PWHT:	
Weld Details			
Item	Description (weld number etc.)	Rail Manufacturer / Heat number (Side 1)	Rail Manufacturer / Heat number (Side 2)
1			
2			
3			
4			
5			
6			
7			
8			
Tests Required (select "Testing as per specification" or select individual tests)			
Testing as per specification or;			
Item	Non Destructive Testing	Metallurgical / Mechanical Tests	Other Details
1			
2			
3			
4			
5			
6			
7			
8			
Additional details (includes additional requirements, tests, witnessing requirements etc.):			

Form M4.3 LMATS Test Request (Rails)