

### TEST REPORT

Doc. No : GTL/D/7.5/02

ULR-TC596126400020272F

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|                          |                                                                                                                                                            |                           |                          |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------|
| <b>Report Issued To:</b> | <b>Chemie Colloids</b><br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br><b>Phone No :</b> 8347639761<br><b>Email :</b> qc@chemiecolloids.com | <b>Test Report No</b>     | <b>: GTL/04260910110</b> |
|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                         |                           |                     |
|---------------------------------|-------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Equipment Swab</b> | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>         | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>             | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>   |                           |                     |
| <b>Marking</b>                  | <b>: Blender</b>        |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>       |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>     | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Yeast and Mould Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |
| 2                                  | Total Plate count cfu/Swab     | 06 cfu  | GL/WI/M-119 | Max.50 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

**Ketul**  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

**Krishna Amin**  
**Autho. Signatory**

\*\*\* END OF REPORT \*\*\*

#### Disclaimer Note

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TC-5961

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|                          |                                                                                                                                                            |                           |                          |
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| <b>Report Issued To:</b> | <b>Chemie Colloids</b><br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br><b>Phone No :</b> 8347639761<br><b>Email :</b> qc@chemiecolloids.com | <b>Test Report No</b>     | <b>: GTL/04260910111</b> |
|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                         |                           |                     |
|---------------------------------|-------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Equipment Swab</b> | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>         | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>             | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>   |                           |                     |
| <b>Marking</b>                  | <b>: Pulvariser</b>     |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>       |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>     | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |
| 2                                  | Total Plate count cfu/Swab     | 07 cfu  | GL/WI/M-119 | Max.50 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

**Ketul**  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

**Krishna Amin**  
**Autho. Signatory**

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|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                         |                           |                     |
|---------------------------------|-------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Equipment Swab</b> | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>         | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>             | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>   |                           |                     |
| <b>Marking</b>                  | <b>: Vibro Shifter</b>  |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>       |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>     | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |
| 2                                  | Total Plate count cfu/Swab     | 10 cfu  | GL/WI/M-119 | Max.50 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**

For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*Krishna Amin*  
**Krishna Amin**  
**Autho. Signatory**

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|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                         |                           |                     |
|---------------------------------|-------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Equipment Swab</b> | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>         | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>             | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>   |                           |                     |
| <b>Marking</b>                  | <b>: Washing Tank-1</b> |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>       |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>     | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |
| 2                                  | Total Plate count cfu/Swab     | 11 cfu  | GL/WI/M-119 | Max.50 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*Krishna Amin*  
**Krishna Amin**  
**Autho. Signatory**

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|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------|
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|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                         |                           |                     |
|---------------------------------|-------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Equipment Swab</b> | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>         | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>             | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>   |                           |                     |
| <b>Marking</b>                  | <b>: Washing Tank-2</b> |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>       |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>     | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |
| 2                                  | Total Plate count cfu/Swab     | 15 cfu  | GL/WI/M-119 | Max.50 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

*Ketul*  
**Ketul Padhiyar**

**Reviewed By**



For Verification

*Krishna Amin*  
**Krishna Amin**

**Autho. Signatory**

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|                          |                                                                                                                                                            | <b>Date of Receipt</b>    | <b>: 05/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Date of Issue</b>      | <b>: 10/09/2026</b>      |
|                          |                                                                                                                                                            | <b>Customer's Ref. No</b> | <b>: N.M</b>             |

|                                 |                              |                           |                     |
|---------------------------------|------------------------------|---------------------------|---------------------|
| <b>Sample Described as</b>      | <b>: Swab Sample</b>         | <b>Mfg. Date</b>          | <b>: N.M.</b>       |
| <b>Sample Qty</b>               | <b>: 01 Nos</b>              | <b>Exp. Date</b>          | <b>: N.M.</b>       |
| <b>Packing Mode</b>             | <b>: --</b>                  | <b>B.No</b>               | <b>: N.M</b>        |
| <b>Sample Condition</b>         | <b>: Satisfactory</b>        |                           |                     |
| <b>Marking</b>                  | <b>: Bharat Bhai-Apron-1</b> |                           |                     |
| <b>Sample Drawn By</b>          | <b>: Customer</b>            |                           |                     |
| <b>Date of Starting of Test</b> | <b>: 05/09/2026</b>          | <b>Date of Completion</b> | <b>: 10/09/2026</b> |

| Sr No                              | Quality Characteristics        | Result  | Test Method | Customer Specification |
|------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b>                  |                                |         |             |                        |
| <b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                  | Total Plate count cfu/Swab     | 17 cfu  | GL/WI/M-119 | Max.50 cfu             |
| 2                                  | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**

For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*8. M. M.*  
**Krishna Amin**  
**Autho. Signatory**

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                    |                                                                         |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <b>Sample Described as</b> : Swab Sample<br><b>Sample Qty</b> : 01 Nos<br><b>Packing Mode</b> : -- | <b>Mfg. Date</b> : N.M.<br><b>Exp. Date</b> : N.M.<br><b>B.No</b> : N.M |
| <b>Sample Condition</b> : Satisfactory<br><b>Marking</b> : Chetan-Apron-2                          |                                                                         |
| <b>Sample Drawn By</b> : Customer<br><b>Date of Starting of Test</b> : 05/09/2026                  | <b>Date of Completion</b> : 10/09/2026                                  |

| Sr No                                                   | Quality Characteristics        | Result  | Test Method | Customer Specification |
|---------------------------------------------------------|--------------------------------|---------|-------------|------------------------|
| <b>Biological</b><br><b>Pollution &amp; Environment</b> |                                |         |             |                        |
| 1                                                       | Total Plate count cfu/Swab     | 20 cfu  | GL/WI/M-119 | Max.50 cfu             |
| 2                                                       | Yeast and Mound Count cfu/Swab | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*80m0m*  
**Krishna Amin**  
**Autho. Signatory**

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                  |                                                                         |
|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <b>Sample Described as</b> : Hand Swab<br><b>Sample Qty</b> : 01 Nos<br><b>Packing Mode</b> : -- | <b>Mfg. Date</b> : N.M.<br><b>Exp. Date</b> : N.M.<br><b>B.No</b> : N.M |
| <b>Sample Condition</b> : Satisfactory<br><b>Marking</b> : Bharat Bhai Employee-1                |                                                                         |
| <b>Sample Drawn By</b> : Customer<br><b>Date of Starting of Test</b> : 05/09/2026                | <b>Date of Completion</b> : 10/09/2026                                  |

| Sr No                                                   | Quality Characteristics    | Result  | Test Method | Customer Specification |
|---------------------------------------------------------|----------------------------|---------|-------------|------------------------|
| <b>Biological</b><br><b>Pollution &amp; Environment</b> |                            |         |             |                        |
| 1                                                       | Total Plate count cfu/Swab | 15 cfu  | GL/WI/M-119 | Max. 20 cfu            |
| 2                                                       | Yeast & Mould count /Swab  | < 1 cfu | GL/WI/M-119 | Max. 10 cfu            |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

CONFORM

Note : NM = Not Mentioned, Customer requested for the above test only

FOR, GUJARAT TESTLAB PVT. LTD



For NABL Scope

*Ketul*  
Ketul Padhiyar  
Reviewed By



For Verification

*S.M.A.*  
Krishna Amin  
Autho. Signatory

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### TEST REPORT

Doc. No : GTL/D/7.5/02

ULR-TC596126400020280F

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|                                                                                                                                                                              |                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Report Issued To:</b> Chemie Colloids<br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br><b>Phone No :</b> 8347639761<br><b>Email :</b> qc@chemiecolloids.com | <b>Test Report No</b> : GTL/04260910118<br><b>Date of Receipt</b> : 05/09/2026<br><b>Date of Issue</b> : 10/09/2026<br><b>Customer's Ref. No</b> : N.M |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                       |                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>Sample Described as</b> : Hand Swab<br><b>Sample Qty</b> : 01 Nos<br><b>Packing Mode</b> : --<br><b>Sample Condition</b> : Satisfactory<br><b>Marking</b> : Chetan Employee-2<br><b>Sample Drawn By</b> : Customer<br><b>Date of Starting of Test</b> : 05/09/2026 | <b>Mfg. Date</b> : N.M.<br><b>Exp. Date</b> : N.M.<br><b>B.No</b> : N.M.<br><b>Date of Completion</b> : 10/09/2026 |
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| Sr No                                             | Quality Characteristics    | Result  | Test Method | Customer Specification |
|---------------------------------------------------|----------------------------|---------|-------------|------------------------|
| <b>Biological<br/>Pollution &amp; Environment</b> |                            |         |             |                        |
| 1                                                 | Total Plate count cfu/Swab | 16 cfu  | GL/WI/M-119 | Max. 20 cfu            |
| 2                                                 | Yeast & Mould count /Swab  | < 1 cfu | GL/WI/M-119 | Max. 10 cfu            |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*S.A.M.*  
**Krishna Amin**  
**Autho. Signatory**

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**TEST REPORT**

Doc. No : GTL/D/7.5/02

ULR-TC596126400020281F

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| <b>Report Issued To:</b> <b>Chemie Colloids</b><br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br><b>Phone No :</b> 8347639761<br><b>Email :</b> qc@chemiecolloids.com | <b>Test Report No</b> : GTL/04260910119<br><b>Date of Receipt</b> : 05/09/2026<br><b>Date of Issue</b> : 10/09/2026<br><b>Customer's Ref. No</b> : N.M |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                     |                                                                         |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <b>Sample Described as</b> : Swab Sample.<br><b>Sample Qty</b> : 01 Nos<br><b>Packing Mode</b> : -- | <b>Mfg. Date</b> : N.M.<br><b>Exp. Date</b> : N.M.<br><b>B.No</b> : N.M |
| <b>Sample Condition</b> : Satisfactory<br><b>Marking</b> : Sterilization                            |                                                                         |
| <b>Sample Drawn By</b> : Customer<br><b>Date of Starting of Test</b> : 05/09/2026                   | <b>Date of Completion</b> : 10/09/2026                                  |

| Sr No                                             | Quality Characteristics    | Result  | Test Method | Customer Specification |
|---------------------------------------------------|----------------------------|---------|-------------|------------------------|
| <b>Biological<br/>Pollution &amp; Environment</b> |                            |         |             |                        |
| 1                                                 | Total Plate count cfu/Swab | 25 cfu  | GL/WI/M-119 | Max.50 cfu             |
| 2                                                 | Yeast & Mould count /Swab  | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**

For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*G.M.A.*  
**Krishna Amin**  
**Autho. Signatory**

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### TEST REPORT

Doc. No : GTL/D/7.5/02

ULR-TC596126400020282F

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Report Issued To:</b> Chemie Colloids<br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br><b>Phone No :</b> 8347639761<br><b>Email :</b> qc@chemiecolloids.com | <b>Test Report No</b> : GTL/04260910120<br><b>Date of Receipt</b> : 05/09/2026<br><b>Date of Issue</b> : 10/09/2026<br><b>Customer's Ref. No</b> : N.M |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                     |                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>Sample Described as</b> : Swab Sample.<br><b>Sample Qty</b> : 01 Nos<br><b>Packing Mode</b> : --<br><b>Sample Condition</b> : Satisfactory<br><b>Marking</b> : Storage Area<br><b>Sample Drawn By</b> : Customer<br><b>Date of Starting of Test</b> : 05/09/2026 | <b>Mfg. Date</b> : N.M.<br><b>Exp. Date</b> : N.M.<br><b>B.No</b> : N.M.<br><b>Date of Completion</b> : 10/09/2026 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|

| Sr No                                             | Quality Characteristics    | Result  | Test Method | Customer Specification |
|---------------------------------------------------|----------------------------|---------|-------------|------------------------|
| <b>Biological<br/>Pollution &amp; Environment</b> |                            |         |             |                        |
| 1                                                 | Total Plate count cfu/Swab | 30 cfu  | GL/WI/M-119 | Max.50 cfu             |
| 2                                                 | Yeast & Mould count /Swab  | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

**CONFORM**

Note : NM = Not Mentioned, Customer requested for the above test only

**FOR, GUJARAT TESTLAB PVT. LTD**



For NABL Scope

*Ketul*  
**Ketul Padhiyar**  
**Reviewed By**



For Verification

*B.M.A.*  
**Krishna Amin**  
**Autho. Signatory**

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### TEST REPORT

Doc. No : GTL/D/7.5/02

ULR-TC596126400020283F

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|                   |                                                                                                                                       |                    |                   |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------|
| Report Issued To: | Chemie Colloids<br>138, Shivalaya Complex, Pin<br>Code-362560, Una, Gujarat<br>Phone No : 8347639761<br>Email : qc@chemiecolloids.com | Test Report No     | : GTL/04260910121 |
|                   |                                                                                                                                       | Date of Receipt    | : 05/09/2026      |
|                   |                                                                                                                                       | Date of Issue      | : 10/09/2026      |
|                   |                                                                                                                                       | Customer's Ref. No | : N.M             |

|                          |                   |                    |              |
|--------------------------|-------------------|--------------------|--------------|
| Sample Described as      | : Swab Sample.    | Mfg. Date          | : N.M.       |
| Sample Qty               | : 01 Nos          | Exp. Date          | : N.M.       |
| Packing Mode             | : --              | B.No               | : N.M        |
| Sample Condition         | : Satisfactory    |                    |              |
| Marking                  | : Production Area |                    |              |
| Sample Drawn By          | : Customer        |                    |              |
| Date of Starting of Test | : 05/09/2026      | Date of Completion | : 10/09/2026 |

| Sr No                                 | Quality Characteristics    | Result  | Test Method | Customer Specification |
|---------------------------------------|----------------------------|---------|-------------|------------------------|
| Biological<br>Pollution & Environment |                            |         |             |                        |
| 1                                     | Total Plate count cfu/Swab | 32 cfu  | GL/WI/M-119 | Max.50 cfu             |
| 2                                     | Yeast & Mould count /Swab  | < 1 cfu | GL/WI/M-119 | Max.10 cfu             |

Remark: In respect of the test performed the submitted sample to the above specification for the tested parameters.

CONFORM

Note : NM = Not Mentioned, Customer requested for the above test only

FOR, GUJARAT TESTLAB PVT. LTD.



For NABL Scope

*Ketul*  
Ketul Padhiyar  
Reviewed By



For Verification

*S. A. M.*  
Krishna Amin  
Autho. Signatory

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