

Applied Sensory, LLC Olive Oil Sample Submittal Form July 2024 – June 2025

Submitted by (Name):		Telephone:	e-mai	it:			
Company Name:		Company Address:	Company Address:				
Inst	tructions: Please identify each olive oil Minimum sample volume re						
	Identification of Sample		SENSORY				
#				Basic* (\$150/oil)	IOC Panel Test* (\$160/oil)	Detailed* (\$200/oil)	
1							
2							
3							
4							
5							
6							
* Re	efer to <i>Applied Sensory Olive Oil Sensory Ev</i>	valuation Services and Prices	for more inform	ation about ea	ach type of sensor	y test	
		Authorization					
Cli	ient and Applied Sensory are parties to a ${\cal C}$	ertification Services Agreeme	ent that governs t	the services re	equested by the C	lient.	
Client / Responsible Party Signature:				Date:	/ /		

Please send this form with sample(s) and payment to: Applied Sensory, LLC

1625 Trancas St #2032

Napa, CA 94558

For more information on this service, please contact Anna Leachman at (310) 920-8715 or e-mail anna@appliedsensory.com

OLIVE OIL GRADE STANDARDS ARE BASED UPON BOTH SENSORY AND CHEMICAL DATA.