



(712) 764-2197 • quotes@libertycalibration.com

Antenna Pattern Test Request Form

Section 1: Company & Shipping Info

Purchase Order #:

Company Name:

Company Address (Street, City, State, Zip):

Technical Contact/End User Name:

Purchasing Contact:

Phone #:

Phone #:

Fax #:

Fax #:

Email:

Email:

Name on Certificate:

Address on Certificate (Street, City, State, Zip):

“Ship To” Name:

“Ship To” Address (Street, City, State, Zip):

Return Shipping Company (FedEx, UPS, etc.):

Return Shipping Method (1 day, 2 day, ground, etc.):

Customer’s Account Number:



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Section 2: Calibration Information

A detailed mechanical drawing of the antenna (dimensions in inches or meters) and a photo MUST be submitted prior to setting a date for calibration. If you do not mark the phase center, we will establish it for you.

Purchase Order #:

Company Name:

Manufacturer:

Model:

Serial Number:

Asset Number:

Antenna Connector Type (Type N, BNC, SMA, K, etc.):

Weight of the Unit:

lbs.

Cal Requirements

Distance (1m, 3m, 10m, other):

Frequency Range (Are there specific steps/points needed? Additional costs may be added.):

Increments needed in Azimuth and Elevation (in degrees):



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Purchase Order #:

Company Name:

What else do you need with the pattern measurements?

Gain Calculated

Beamwidth

VSWR

ACF

EIRP (Effective Radiated Power)

What type of plots do you want?

Polar

3D

In what format do you want your data? (Excel, .txt, etc.)

Notes:

1. Please send a copy for each unit
2. If calibration standard or cal requirements are not listed, calibration will be performed to Liberty Labs default standard.
3. If calibration standard is customer's internal standard, a paper or electronic copy must be given to Liberty Labs.
4. All companies must complete and return our shipping waiver before units can be returned.
5. All information MUST be completed. If form is not completed and signed, calibration will be delayed.
6. A hardcopy purchase order or credit card info must be on file in order for calibration to be performed.

Customer Approval Signature

Date

Please email this form to quotes@libertycalibration.com for an estimate.