

Request form

Legal parentage test



Order number Verilabs:

(to be filled in by Verilabs)

By filling in this form you will request a legal kinship test at Verilabs. For a correct and fast process of your request, it is important to clearly and completely fill in both pages of the form.

Please let us know whether you want to receive a quotation or an invoice (check which is applicable):

- Quotation (without obligations) Invoice

A. TYPE OF ANALYSIS (mark which is applicable):

- paternity (the alleged fathers are not related, e.g. brothers)
 maternity (the alleged mothers are not related, e.g. sisters)
 Y-test (please mention below how the persons are possibly related)
 X-test (please mention below how the persons are possibly related)
 extra original report
 other:

Remarks/additional information for the type of analysis:

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B. CLIENT

Please fill in the details of the person that requests the test and will also pay the invoice of the test.

Name:	
Address:	
Zip code + City:	
Telephone number:	
Email address:	
Reference number client:	if applicable

C. CONTACT PERSON (if different than B)

Please fill in the details of the person with whom Verilabs should communicate regarding the test. You only need to fill this in if the contact person is different than the client mentioned at B.

Name:	
Address:	
Zip code + City:	
Telephone number:	
Email address:	

D. REPORT ADDRESS (if different than B)

*Please fill in the address where Verilabs should send the report to once it's ready. In the fee of a test there is one original Dutch report included. An English or additional report can be requested at section A. You only need to fill in this section if the report address is different than the address mentioned at B. **Please note:** we cannot send reports to government agencies.*

Name:	
Address:	
Zip code + City:	
Country:	

E. CONTACT PERSON ABROAD (if applicable):

This section only needs to be filled in if the test includes people from whom the DNA material should be taken abroad. Please fill in the details of the contact person who is abroad in this section. Please note: these personal details will be send to the embassy/consulate general where the DNA sampling should take place.

Name:	
Telephone number:	
Email address:	

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F. TEST PERSONS IN THE NETHERLANDS

Fill in the personal details of the test person(s) from whom the DNA material should be taken by Verilabs in the Netherlands. Please use the personal details as they are mentioned on the ID document of the test person.

Test person 1	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 2	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 3	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 4	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 5	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female

G. TEST PERSONS ABROAD (if applicable)

This section only needs to be filled in if the test includes people from whom the DNA material should be taken abroad. Fill in the personal details of the test person(s) from whom the DNA material should be taken abroad. Please use the personal details as they are mentioned on the ID document of the test person or, if the test person has no ID document, on the (refugee) document of the UNHCR.

- I request the DNA samples of persons mentioned below to be taken by the Dutch embassy/consulate-general in:

Test person 1	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 2	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 3	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 4	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
Test person 5	Role in the test: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child <input type="checkbox"/> Other, namely		
First name & Last name	Date of Birth	Place of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female

Please send the filled in form to info@verilabs.nl.

Upon receiving the request form we will send you a quotation or an invoice. After we have received a (down)payment we will start with the process of the DNA test. The complete quotation or invoice has to be paid before we will analyze the DNA samples in the lab and the report will be made.