

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_ Job/Project Name: \_\_\_\_\_  
 Company: \_\_\_\_\_ Fax No: \_\_\_\_\_ Job/Project No: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_ Special Instructions: \_\_\_\_\_  
 City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Please select (✓): ( ) Fax Results ( ) Email Results ( ) Mail

Sample ID	Description/Location	Date Sampled	Sample Type	Air Volume (L)	Turnaround Time (✓)				Analysis *	SP **	For Lab Use
					4 hr	24 hr	48 hr	STD			

Sample Collected by: \_\_\_\_\_ Total Number of Samples Submitted: \_\_\_\_\_  
 Relinquished by: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Received by: \_\_\_\_\_ Date/Time: \_\_\_\_\_  
 Relinquished by: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Received at lab by: \_\_\_\_\_ Date/Time: \_\_\_\_\_  
 Authorized by Client (Signature): \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Sample Shipped by: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Shipped via: ( ) Courier by: \_\_\_\_\_ ( ) Drop off, ( ) Other: \_\_\_\_\_  
 Sample Condition upon Receipt at Lab (✓): ( ) Acceptable, ( ) Unacceptable (Explain): \_\_\_\_\_

\* PLM or PCM. In accordance with the EPA method (EPA-600/R-93/116), bulk sample analysis will be done by layer. Please indicate if only a specific layer(s) should be analyzed.  
 \*\* SP – Stop Positive, please indicate if required.