

# Deposit Sample Submittal Form



## CLIENT INFORMATION

Company:  
Location:  
Contact:  
Address 1:  
Address 2:  
City: State: Zip:  
Country:  
Email: Phone:  
Purchase Order No. (PO):

## PLEASE SELECT SERVICE PRIORITY

### STANDARD

### EXPEDITED

### RUSH

STANDARD price x 1 ½  
10 business days from receipt  
of sample

STANDARD price x 2  
5 business days from receipt  
of sample

**NOTE: Availability of EXPEDITED and RUSH services must be approved and scheduled by the laboratory.**

Date Sample(s) Collected: Number of Samples:  
Sample(s) Name:  
Sample(s) Description:  
Sample(s) Source/Location:  
Grind and Sieve to Homogenize?  
Loss on Ignition (LOI)?  
SEM/EDXS Elemental Analysis of Bulk Deposit?  
SEM/EDXS Elemental Analysis of Multiple  
Samples (Separate Types of Particles) Within  
Sample Before Homogenization?  
Other Work Requested ? (Specify)

**NOTE: Oily samples generally are not accepted (please call to discuss special handling options).**

Does the Deposit Sample(s) Require a Chain of Custody Form? Yes No