

Analysis Request Form

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This form is for the submission of asbestos samples to Environmental Health Solutions. If you wish to submit samples for chemical testing, please contact us to discuss.

Client Details

Business Name													
Primary Contact Name													
Address													
Contact Number(s)													
Report Recipient Email													
Invoice Email													
Payment Methods													
Cash				Credit Card							Purchase Order		
С	Cash			Туре	ype Card E			piry			PO Nu	mber:	
EF	EFTPOS Car			d Number									
Bank Transfer Ca			rd Name										
Note: An invoice will follow once analysis is complete detailing payment methods.													
For new clients, test reports will be withheld until payment is received.													
Analysis Request (If left empty, 24 hour rate will be charged)													
Analysis Requested Priority				Asbestos Identification:			Asbestos Identification Soils (Presence/Absence						
				2-3 Days				Soils (P	resence/Ab		me Day		
				(\$60+gst)			\$80+gst)				.00+gst)		
Contact the laboratory to confirm availability.													
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Asbestos Sample Submission Criteria													
Samples submitted to Environmental Health Solutions for asbestos testing must be labelled individually as below													
and stored within Ziplock bags or equivalent. The 'Site Address', 'Client Reference' 'Sample Names' and 'Materials' sections will appear on the test report as submitted.													
Sample Site Address/Location													
	Client												
Samples Submitted				Bv				Da	ate Submit	ted			
	-												
Client Additional Information													
No.			(E		ple Name eiling, Soil stockpile)				(E.g.,	Material (E.g., Fibro cement, vinyl, soil)			
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													