


Request for Laboratory Services / Chain of Custody - Asbestos

Send Report To				Hygeia Laboratories Inc. 82 W. Sierra Madre Blvd Sierra Madre, CA 91024 (626) 355-4711 (626) 355-4497 Fax www.hygeialaboratories.com		
Company Name						
Company Address						
City State Zip						
Phone				Fax		
Cell Pager				Hygeia Reference #		
Client Project Name				Cash Client #		
Client Project #						Samples Submitted
Purchase Order #						Samples Analyzed
Send Report Via	<input type="checkbox"/> Email <input type="checkbox"/> Fax		<input type="checkbox"/> Verbal Results?		<input type="checkbox"/> Do you require a mailed report?	
Email Address						
Turnaround Time	<input type="checkbox"/> Normal (3-5 business days) <input type="checkbox"/> Next Day (24 hrs) <input type="checkbox"/> Same Day (Rush) <input type="checkbox"/> Weekend Rush					
Type of Sample	<input type="checkbox"/> Air <input type="checkbox"/> Bulk <input type="checkbox"/> Dust (microvac) <input type="checkbox"/> Dust (w/ipe) <input type="checkbox"/> Soil <input type="checkbox"/> Paint <input type="checkbox"/> Water <input type="checkbox"/> Other					
Asbestos (Optical)		Asbestos (TEM)				
<input type="checkbox"/> PLM		<input type="checkbox"/> AHERA		<input type="checkbox"/> Qualitative Dust		<input type="checkbox"/> Qualitative Bulk
<input type="checkbox"/> PLM Point Count 400 pts		<input type="checkbox"/> EPA Level II		<input type="checkbox"/> Quantitative Dust		<input type="checkbox"/> Semi-Quantitative Bulk
<input type="checkbox"/> PLM Point Count 1000 pts		<input type="checkbox"/> NIOSH 7402 (PCM Equiv)		<input type="checkbox"/> Drinking Water (potable)		<input type="checkbox"/> Full Quantitative Bulk
<input type="checkbox"/> PCM		<input type="checkbox"/> ISO 10312		<input type="checkbox"/> Drinking Water (non-potable)		
				<input type="checkbox"/> Partical Characterization		<input type="checkbox"/> Supplies
Additional Instructions						
For Lab Use Only		Sample Integrity <input type="checkbox"/> accept <input type="checkbox"/> reject		1st Sample # _____		
Reviewed by	Date _____	Initials _____		Price / Sample _____		
Results Reported by						
Date _____	Time _____	Initials _____	Verbal	Fax	Email	Invoice # 77- _____
Date _____	Time _____	Initials _____	Verbal	Fax	Email	Log Out Date _____
Comments						
Relinquished By	Received By	Date	Time	Reason for Change of Custody		
(Signature)	(Signature)					

The sample collector is responsible for ensuring that all samples have been preserved according to the appropriate and applicable methodology.