

## Midwest Laboratories, Inc. 13611 B Street, Omaha, NE 68144 402-334-7770

## **ENVIRONMENTAL SAMPLE SUBMITTAL FORM**

Account Number/ Company Name:				Puro	chase Order:	# **							
REPORT & BILL TO					IDENTIFICATION					СОРҮТО			
Name:					Client Name:					Name:			
Address:					Cheffe Hume.					Address:			
City/State: ZIP:				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Sample Date:					City/State: ZIP:			
Phone: FAX:					Sample Time:					Email:			
Email:				50	Sample time.					Eman			
Sample Location:						Regulatory	(Y/N):			State Regulatory	/ Agency:		
CLIENT SAMPLE ID	CBOD	BOD	COD	PH	SOLIDS <sup>1</sup>	AMMONIA NITROGEN	NITRATE NITROGEN	TKN	НЕМ	CHLORIDE	CYANIDE	METALS <sup>2</sup>	OTHERS <sup>3</sup>
I. Please state type of solids (TS, TSS, TDS, TVS, TVSS)					LAB USE ONLY					Signature of Sampler:			
2. Please list the metals desired (Total, Dissolved, or Recoverable)				T€	Temperature on Arrival:					Results to be submitted to regulatory: Yes No			
B. Please list analyses					< 6 ° C: Warm: N/A:					Date and Time Sampled:			
In the absence of specific instructions to the contrary, Midwest Laboratories will inalyze your sample(s) using accredited test methods (when available).				N	No. of Containers:					Date Shipped: (Please ship samples on ice)			
					Samples Preserved Properly: Yes No					RC FORM 05 V.2 - Effective 8.29.2017			
		<u> </u>					NC FORIN 05 V.Z - Ellective 8.23.201)						