



CHAIN OF CUSTODY / TEST REQUEST FORM
N0005 - GCL (2)

REPORT RESULTS TO:	Primary Contact:	Primary Contact's E-mail:	Shipping Address TRI/Environmental, Inc. Attn: Soil-Interaction Lab 9063 Bee Caves Road Austin, Texas 78733-6201 1-800-880-8378
	Client Company:	Primary Contact's Phone:	
	Project Name:	Also Report Results to:	
	Project Number:	1 Name: <input type="text"/> Email: <input type="text"/>	
	Client P.O. #:	2 Name: <input type="text"/> Email: <input type="text"/>	
	Client Mailing Address:	3 Name: <input type="text"/> Email: <input type="text"/>	
	Client City, State, Zip:	Sender and Shipping Date:	
	<input type="checkbox"/> Check if Reporting and Invoicing are not to the same party	Tracking Information:	

This document can be completed electronically in PDF, partially by hand, or entirely by hand in the field. Please include a copy with the sample(s) sent to the lab for accurate processing.

Sample ID	Product Designation (manufacturer, thickness, polymer, etc.)	Testing Standard																												
		Roll / Roll Cut	Coupon / Circles	Other	D5261 Top GT Comp. Mass per. Area	D5261 Bottom GT Comp. Mass per. Area	GC: D1777 Thickness	D5993 Bentonite Mass per. Area	D6768 Grab Strength	D4632 Grab Strength (Historic)	D6496 Peel Strength (1x4 in)	D4632 Peel Strength (Historic, 1x2 in)	D4633 Puncture	D6243 Internal Shear Strength	D5084 Permeability	D5687 Index Flux	GRI GCL 3 Permeability	D6766 Chem. Compat. Leachate Perm	D5890 Swell Index	D5691 Fluid Loss	D7503 Cation Exchange Capacity	Cation Exchange Capacity Wang et al.	Loss on Ignition	API 13A Viscosity	D6140 Asphalt Retention	TxDOT 3099 Asphalt Retention	D4643 Moisture Content	Contact to Discuss Special Instructions		
1.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Special Instructions					
1.					
2.					
3.					
4.					
5.					

Authorization: _____
Signature

Printed Name

Date