



Client _____
 Client Project _____
 Client Contact _____
 Due Date _____

Send Results to: _____
 Contact _____
 Company _____
 Address _____
 City, State, Zip _____
 Phone _____
 Email _____

Billing Information: _____
 Contact _____
 Company _____
 Address _____
 City, State, Zip _____
 Phone _____
 Email _____
 Fax _____

Samples Retinquished by (Client / Courier) _____
 Signature: _____

Authorization to Proceed: _____
 Authorization to proceed and/or acceptance of GTS testing results indicates Client acceptance to our Standard Terms and Conditions

Purchase Order No. _____
 Date Submitted: _____

Chain of Custody Form

Sample Disposal Method: Discard / Return
 Sample Retention Time is 2 months after final report is sent.

Sample Contamination: Y / N

Pour Date	Mold Size	Sample ID	Break Schedule	Compressive Strength Testing																	Location	
				Sample Collection Information							Fresh Concrete Test Results											
				Concrete Class	28 Day Spec	Supplier	Total Yards	Truck Number	Batch Ticket Number	Batch Time	Sample Collection (Direct Chute, Bucket, Etc)	Slump (in.)	Air Content (%)	Mix Temp	Ambient Temp	Time of Test	Amount of Cylinders Cast	Field Cure Temp Range	Material (Concrete, Grout, Mortar, Etc.)			

Additional testing can be found at www.gts-labs.com and www.tri-env.com. For a more comprehensive list of geotechnical testing services, please refer to our full fee schedule for PA and TX locations. If you require modified test procedures or testing of non-standard materials, please request a project-specific quote.

Test Parameters: _____

Notes: _____