



	of	
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REPORT RESULTS TO:	Primary Contact:
	Client Company:
	Project Name:
	Project Number:
	Client P.O. #:
	Client Mailing Address:
	Client City, State, Zip:
<input type="checkbox"/> Check if Reporting and Invoicing are not to the same party	

Primary Contact's E-mail:
Primary Contact's Phone:
Also Report Results to:
1 Name: E-mail:
2 Name: E-mail:
3 Name: E-mail:
Sender and Shipping Date:
Tracking Information:

Shipping Address
TRI/Environmental, Inc.
Attn: Geosynthetic Lab
9063 Bee Caves Road
Austin, Texas 78733-6201
1-800-880-8378

Please note that this COC has form fields that can be completed within a standard PDF reader. Some clients complete the entire COC electronically, some pre-populate contact information and fill in the samples and assignments by hand, and others complete the entire form by hand in the field. Please have a copy of the COC accompany the sample(s) to the laboratory so that work can be initiated upon receipt with the correct project name, sample identifications, assigned tests, and relevant details in place. Thank you for your business.

Sample ID	Product Designation (manufacturer, thickness, polymer, etc.)	Sample Type			Testing Standard																																		
		Roll / Roll Cut	Coupon / Circles	Other	D5199 Thickness	D882 Tensile Properties -Sheet	D1004 Tear Strength	D1204 Dimensional Stability	D1790 Low Temperature Impact	D792 Specific Gravity/Density	D1239 Water Extraction	D2124 Avg Plasticizer Molecular Weight	D1203 Volatile Loss	G160 Soil Burial Exposure	D751 Hydrostatic Resistance	D882 Seam Strength (Shear & Peel)	D6693 Tensile Strength																						
1																																							
2																																							
3																																							
4																																							
5																																							

Special Instructions	
1	
2	
3	
4	
5	

Authorization: _____
Signature
Printed Name
Date