



ANALYSIS REQUEST

Quote No

Primary Contact

Submitted By

Client Name

Address

Postcode

Phone

Mobile

Email

Charge To

Client Reference

Order No

Results To

Reports will be emailed to Primary Contact by default. Additional Reports will be sent as specified below.

Email Primary Contact Email Submitter Email Client

Email Other

Other

R J Hill Laboratories Limited
Ground Floor, 28 Heather Street
Parnell
Auckland 1052, New Zealand

0508 HILL LAB (44 555 22)
 +64 7 858 2000
 mail@hill-labs.co.nz
 www.hill-labs.co.nz

Office use only
(Job No)

CHAIN OF CUSTODY RECORD

Sent to

Hill Laboratories

Date & Time:

Name:

Tick if you require COC to be emailed back

Signature:

Samples will be processed at a Hill Labs site with the appropriate testing capability and capacity. Please inform the lab if you wish samples to be retained and analysed at the site of receipt.

Received at

Hill Laboratories

Date & Time:

Name:

Signature:

ADDITIONAL INFORMATION

Priority

Low

Normal

High

Urgent (ASAP, extra charge applies, please contact lab first)

Requested Reporting Date: _____

*Please ensure all asbestos samples are **individually double bagged** upon submission to the laboratory.*

No.	Sample Name	Sample Material	Sample Location	Sample Date	Tests Required (if not as per Quote)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

No.	Sample Name	Sample Material	Sample Location	Sample Date	Tests Required (if not as per Quote)
14					
15					
16					
17					
18					
19					
20					
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23					
24					
25					
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41					