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ANALYTICAL SERVICES REQUEST FORM

DATE: _____
CUSTOMER: _____
TELEPHONE: _____
FAX: _____
PAGER: _____
KEY CONTACT PERSON: _____
PROJECT NAME: _____

	<u>SAMPLE TYPE</u>	<u>QUANTITY</u>	<u>RESULTS</u> <u>DUE BY (DATE / TIME)</u>
PCM	N/A	_____	_____
PLM	_____	_____	_____
TEM	_____	_____	_____
LEAD	_____	_____	_____
	_____	_____	_____

TURNAROUND TIME COMMENTS: _____

DATE / TIME SAMPLES ARRIVING: _____

SAMPLES ARRIVING BY: _____

SPECIAL REPORTING INSTRUCTIONS: _____

REQUESTED BY: SC / RS / OTHER _____

ACKNOWLEDGED BY: _____

Federal Express	800-463-3339	Acct. # 1114-3595-2
United Parcel (UPS)	800-742-5877	Acct. # 3360035666
Airborne	800-247-2676	
US Postal Service	800-222-1811	
Diamond Courier	800-959-0050	Acct. # 99721
Heaven Sent	609-663-9111	Acct. # X00698
	215-545-9100	
Phoenix Express	800-220-2434	
Delta Dash	800-638-7333	
Delta Baggage	215-492-3636	
Clairn (PHL)		
USAIR PDQ (PHL)	610-362-7234	

Airbill No.: _____

Airline: _____

Flight No.: _____

Arrival Time: _____