



Account Code

Credit Card Number

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EXP / Check # _____

Credit Card On File Name On Card: _____ Signature: _____

CHAIN OF CUSTODY CONTACT INFORMATION (Please Print Clearly) Report Delivery: ONLINE EMAIL FAX Report Type: Standard Detailed

Company/Branch: _____ Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Phone: _____ Fax: _____ Email: _____

TEST LOCATION INFORMATION

Property Name: _____ Address: _____ City: _____ State: _____ Zip (Required) _____

Phone: _____ Sampling Date: ____/____/____ Time: ____:____ AM / PM Relinquished by: _____ Date: ____/____/____

WEATHER OUTSIDE				MOLD TURNAROUND TIME CODES				MOLD/BACTERIA		SAMPLE TYPE CODES		Other Codes
R/H	LEVEL	Light	Moderate	Heavy	ND - 24 Hour (End of next business day) (Standard for mold samples only)	STAT - 3 Hour Mold Turnaround (\$100 Additional for each Mold Sample)	Z5 - Zefon 5	SW - Swab	PD - Petri Dish	D - Dust		
					SD - Same Day (End of same day) (\$30 Additional for each Mold sample)	PR - Priority (Online registration or hand delivered to the lab only)	M5 - Micro 5	T - Tape / Bio-Tape	CA - Carpet	W - Water		
					RECOMMENDED FLOW RATE / SAMPLING TIMES		AOC - Air-O-Cell	B - Bulk	BA - Bacteria	SO - Soil		
					Z-5: 5 L X 5 MIN	MICRO 5: 5 L X 5 MIN	ST - Other Spore Traps	AN - Andersen Plate	O - Other	P - Paint		
					AIR-O-CELL: 15 L X 10 MIN	CARPET: 5 L X 1 MIN						

24/7 ACCOUNT ACCESS AVAILABLE AT WWW.RELIABLELAB.COM

MOLD / BACTERIA ANALYSIS

OTHER ANALYSIS

SAMPLE SERIAL #	COLLECTION LOCATION (Please Print Clearly)	Turnaround Time Code (Required)	Flow Rate Liters (Required)	Flow Rate Minutes (Required)	Sample Type Code (Required)	MOLD				BACTERIA		LEAD	3 Business Days Turnaround Time						
						Mold Analysis	Culture For Bulk/Swab \$25 extra (7 Days)	Mold Species ID \$50 extra (7 Days)	Coliform E. coli ID (2 Days)	Bacteria Species ID \$60 extra (7 Days)	ASBESTOS		WATER ANALYSIS						
											PCM		BULK	BACTERIA	Chemical Bacteria	Chemical Bacteria Lead	FHA Water Analysis		
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			

Send to: 1675 N. Commerce Parkway, Weston, FL 33326 | 40 Hanlan Road, Suite 45, Vaughan, ON Canada L4L 3P6 800-427-0550

Received by: Accepted Rejected Prepared by: _____ Analyzed by: _____ Reported by: _____

COC NUMBER