



Request for Analysis



Activation Laboratories Ltd.

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Carrier:	Waybill #:	# of Packages:	# of Samples:
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Date Received:	Work Order #:	Invoice #:
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Priority: <input type="checkbox"/> Normal (may vary depending on package and time of year - please enquire) <input type="checkbox"/> RUSH (required by) _____ (Note: subject to surcharge, method dependent)	Confirmation of Sample Receipt: <input type="checkbox"/> Yes <input type="checkbox"/> No By: E-mail: _____ or Fax: _____
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Client Info:
 Quote #, PO #, Proforma #: _____ Project: _____

Company: _____ Attn: _____ Address: _____ _____ Phone : _____ Fax: _____ E-mail: _____	Additional Report to: Company: _____ Address: _____ _____ Phone : _____ Fax: _____ E-mail: _____
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Method of Payment:

Payment is included (make cheque or bank draft payable to Activation Laboratories Ltd.)

Charge to Credit Card (please ensure that complete credit card information is provided)

Credit has been established with Activation Laboratories Ltd. (refer to Actlabs' Credit Application Form). Payment will be issued after invoice has been received.

Visa MasterCard

Number: _____

Expiry Date: _____

Name: _____

Signature: _____

Invoicing Instructions:

Mail invoice to: 1st Address 2nd Address

Fax invoice to: 1st Address 2nd Address E-mail invoice to: _____

Storage:

Please Note: License required for the return of irradiated material - cost per shipment is \$200.00 + shipping. Under CFIA regulations, soil, sediment and vegetation samples from outside Canada require incineration prior to disposal; additional charges will apply.

	Return	Dispose	Store	
Rejects	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 60 days	<input type="checkbox"/> After 60 days	<input type="checkbox"/> \$0.25/sample/month
Pulps	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 90 days	<input type="checkbox"/> After 90 days	<input type="checkbox"/> \$0.10/sample/month
Sieve	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 3 months	<input type="checkbox"/> After 3 months	<input type="checkbox"/> \$0.15/sample/month
Irrads	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 30 days	<input type="checkbox"/> After 30 days	<input type="checkbox"/> \$0.15/sample/month

Return Samples To: Company: _____ Address: _____ _____ Attn : _____ Phone: _____	Method of Sample Return: <input type="checkbox"/> At cost (client will be invoiced) <input type="checkbox"/> Our Carrier Account: Carrier Name: _____ Account #: _____ Phone: _____
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Special Instructions/Comments: _____

For samples requiring Geochronology and/or Isotopic Geochemistry, please be sure to include the following information:

- Rock type: _____
- Minerals to be separated, specify: _____
- Estimated age: _____

Authorized Signature: _____

