Eurofins EAG Laboratories Sample Submission

Client Information (or attach business card):

Company name: _____

Client name: _____

Address: _____

Dept./Mail Stop: _____

City/State/ZIP _____

Phone: _____ Fax: _____

Other contact no. (cell, pager): _____

email: _____

Date: _____

EAG job no. (if known): _____

Estimated cost of work (if known): _____

Purchase order number: _____

Please attach a copy of the PO to this form or email a soft copy to po@me.eurofinsus.com

Release number (if applicable): _____

Is this your first EAG analysis? ☐ Yes ☐ No

DESCRIPTION OF WORK REQUIRED

Total # of Samples: _____ ☐ Details or photos attached

Description of Analysis: _____

Purpose of work: _____

☐ Similar to other work? (description and previous EAG job no.) _____

☐ Please have a technical advisor call to discuss analysis: _____

DISPOSITION OF SAMPLES AFTER ANALYSIS

NOTE: Eurofins EAG Laboratories' default policy is to retain samples for eight weeks in case further analysis is required. The samples will then be discarded, unless you have requested their return.

☐ Return samples immediately after analysis ☐ Return after storage period ☐ Discard after storage period

☐ Other sample handling requirements _____

DELIVERY PRIORITY

☐ Standard turnaround ☐ Priority 2 (+50%) ☐ Priority 1 (+100%) ☐ Next in queue (+200%)

PLEASE INCLUDE A COPY OF THIS FORM WITH YOUR SAMPLES AND SUBMIT THE FORM ONLINE AT www.eag.com/contact/ OR VIA EMAIL AT info@eag.com