AGAT Laboratories

Have feedback?
Scan here for a quick survey!

2420 - 42 Avenue NE
Calgary, Alberta T2E 7T6
P: 403-736-5300
webearth.agatlabs.com

Laboratory Use Only

Arrival Temperature: _____

AGAT WO #: _____

Date and Time: _____

Chain-of-Custody Record

Client Information

Company: _____
Contact: _____
Address: _____
_____
Phone: _____ Fax: _____
Project ID: _____

Report(s) To

1. Name: _____
   Email: _____
2. Name: _____
   Email: _____
3. Name: _____
   Email: _____

Comments

Invoice To

Same Yes ☐ / No ☐

Company: _____
Contact: _____
Address: _____
_____
Phone: _____ Fax: _____
PO #: _____

Turnaround Time Required (TAT)

Regular TAT ☐ 10 to 14 business days

Rush TAT ☐ 5 to 7 business days (100% surcharge)
☐ 8 to 9 business days (50% surcharge)

Date Required: _____

Upon selecting a rush TAT, the client accepts that a surcharge will be added to the invoice.

LABORATORY USE (LAB ID #)	SAMPLE IDENTIFICATION	SAMPLE TYPE	SAMPLED		COMMENTS	ANALYSIS REQUEST												HOLD FOR 60 DAYS	PRESERVED (Y/N)
			DATE	TIME															

Samples Relinquished By (Print Name and Sign):	Date/Time	Samples Received By (Print Name and Sign):	Date/Time	Page _____ of _____
Samples Relinquished By (Print Name and Sign):	Date/Time	Samples Received By (Print Name and Sign):	Date/Time	N°: AB

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Report(s) to:

Company: _____ Same as COC#: _____

LABORATORY USE (LAB ID #)	SAMPLE IDENTIFICATION	SAMPLE TYPE	SAMPLED		COMMENTS	ANALYSIS REQUEST												HOLD FOR 60 DAYS	PRESERVED (Y/N)
			DATE	TIME															

Samples Relinquished By (Print Name and Sign):	Date/Time	Samples Received By (Print Name and Sign):	Date/Time	Page _____ of _____
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