

**LABORATORY SERVICE REQUEST (LSR) – Environmental Monitoring**

CLIENT INFORMATION	
<b>Instructions: Submit the form along with sample(s). Initiation of sample analysis will be delayed if form is not complete.</b>	
<b>PBL Quote Number:</b>	<b>PO Number:</b> <i>Credit Card to be used for payment</i> <input type="checkbox"/>
<b>Sponsor (send report to):</b>	<b>Invoice To:</b> <i>Check box if same as sponsor</i> <input type="checkbox"/>
Contact Name:	AP Contact Name:
Company Name:	Company Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Country:	Country:
Phone:	Invoice To Email:
Email:	AP Email:

SERVICE INFORMATION	
<b>Regulatory Treatment:</b> <input type="checkbox"/> Non-regulatory <input type="checkbox"/> cGMP <input type="checkbox"/> GLP	<b>Rush Service (will incur a surcharge):</b> <input type="checkbox"/> YES <input type="checkbox"/> NO

TEST REQUIRED	
<b>Environmental Samples collected by:</b> <input type="checkbox"/> Client <input type="checkbox"/> PBL	Date(s)/Technician: Time Start/End:
	Date(s)/Technician: Time Start/End:
	Technician Time (hours): Travel Time (hours):
<b>SHIPPING:</b> Samples should be shipped at 2-8°C. Samples should not be in transit for more than 24 hours. A sample list/manifest may be used for large sample volumes.	

SAMPLE INFORMATION		
No. of Samples	Collection/Media Type <i>(Air Sample Strips, Fallout Plates, Contact Plates, Swabs, etc.)</i>	Sample Identification <i>(Use sample codes, locations or other identification that should appear on final report)</i>

OTHER TESTS/SPECIAL INSTRUCTIONS
<b>Note that all samples included on the Sample Submission Form will be on a single report.</b>

TESTING AUTHORIZED BY (please sign):

DATE:

*(Signature and date, or electronic signature, is required for testing to begin; unsigned LSR forms will not be processed)*