


SAMPLE CARD

LAB REPORT NUMBER (Lab use):		Please complete in BLOCK CAPITALS only				Form 4128 Rev 6
Customer ID Code:			SAMPLE CARD NUMBER:		 <small>ANALYSING RESULTS PROMOTING SUSTAINABILITY</small>	
Customer / Company Name:			Phone No:			
Address:		Email Report:		P.O. Number:		
		Email Invoice:				
Eircode:		CC Email / Rep Email:		Quote Number:		
Company Rep & Branch name:			Rep Phone No:			
Water Samples Only		Sample Type	Sample Reference/Description	Tests Required	Price €	
Sampling Date	Sampling Time					
		1				
		2				
		3				
		4				
		5				
		6				
		7				
		8				
		9				
		10				
		11				
		12				
		13				
		14				
		15				
Customer details provided are held on file for <u>internal use only</u> and to comply with regulatory requirements & occasionally for promotional purposes.			Customer's Signature*:		Date:	Total incl. VAT: €
Please tick this box if you agree ==>						
Soil: Please indicate : Grassland or Tillage			Delivered by:	Sample Condition:	Paid cash:	Paid Card:
Water: All bacteria samples must be delivered within 24 hours of sampling.			Received at IAS by:	Date Received:	Paid cheque:	Account:
*By completing this sample Card you are accepting our Standard T&C's. Accredited method details and full T&C's are available www.iaslabs.ie/t&c						
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