|  |
| --- |
| **CLIENT** |
| Company Date: |
| Address |
| City, State, Zip |
| Contact Name: Phone: (o):  (m):  |
| E mail:  |
| Project Name:  |
| Project Location:  |
| Other Contact: |
| Requested Turn Around: |
| Sample |  |  |  |  |
| ASTM D421 |  |  |  |  |
| ASTM D422(wash sieve) |  |  |  |  |
| ASTM D422 (sieve and hydrometer) |  |  |  |  |
| ASTM D698 |  |  |  |  |
| ASTM D854 |  |  |  |  |
| ASTM D1140 |  |  |  |  |
| ASTM D1557 |  |  |  |  |
| ASTM D2166 |  |  |  |  |
| ASTM D2216 |  |  |  |  |
| ASTM D2434 |  |  |  |  |
| ASTM D2435\* |  |  |  |  |
| ASTM D2487 |  |  |  |  |
| ASTM D2488 |  |  |  |  |
| ASTM D2850\*\* |  |  |  |  |
| ASTM D2974 |  |  |  |  |
| ASTM D3080\*\* |  |  |  |  |
| ASTM D3740 |  |  |  |  |
| ASTM D4318 |  |  |  |  |
| ASTM D4644 |  |  |  |  |
| ASTM D4767\*\* |  |  |  |  |
| ASTM D4972 |  |  |  |  |
| ASTM D5084 |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

\* For Consolidation, please specify 1) single or double drainage; 2) load/unload or load/unload/reload

\*\* For Shears, please specify Confining Pressures

Comments:

Report results to: