

**DISPATCH**

<b>Mail/Courier to:</b>	<b>Submission Form to:</b>
346A Bilsen Road Geebung QLD 4019	<a href="mailto:info@geochempet.com">info@geochempet.com</a>

**BILLING INFORMATION**

Company Name:		
Company Address:		
Contact Name:	Purchase Order No:	or N/A
Contact Phone:	ABN:	
Accounts Receivable Email:		

**FORWARD COMPLETED WORK TO/DELIVERY INFORMATION**

Company Name:		
Contact Name:	Contact Phone:	Contact Email:
Mail/Courier to:		

**SAFETY INFORMATION\***

Sample submissions with suspected hazardous materials **must** be double bagged and labelled appropriately.  
 Samples without proper notification of hazards will delay processing until a full assessment is provided by the client.  
Please check all that apply.

Toxic	Flammable	Radioactive	Pathogenic
Asbestos	Explosive	None	
Other (please specify)			

**SAMPLE SIZES Minimum\*\***

<b>Rock Spall</b>	Fist size rock specimen	<b>Ballast</b>	1 kg
<b>Drill Core</b>	¼ x 100 mm in length	<b>Concrete Core</b>	100 mm x 100 mm
<b>Unconsolidated Material</b>	500 g	<b>Drill Chip</b>	200 g

**URGENT\*\*\***

<input type="checkbox"/>	If you require an urgent turnaround time, contact <a href="mailto:info@geochempet.com">info@geochempet.com</a> to arrange prior to sending. A surcharge applies per sample for urgent request.
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\* Safety Information – All relevant boxes must be filled out to begin work. Contact must be made to Geochempet Services prior to sending if dangerous goods are suspected. Australian safe work standards must be followed to send and accept hazardous materials.

\*\* Sample Sizes – Insufficient sample amounts may result in unsuccessful completion, charges may still apply for labour and consumables used.

\*\*\* Urgent – Acceptance of works with an urgent turnaround time must be in writing. General time frames are an approximate and may change due to work load.

\*\*\*\* Declaration – Must be signed before work will begin.

Office Use: Sample Received:     /     Receipt Sent:     /     Sample#: G

## THIN SECTION WORK REQUIRED

	Sample ID	Depth (If applicable)	PTS	STD	Other (Please email details)
1					
2					
3					
4					
5					
6					
7					
8					
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30					

## DECLARATION\*\*\*\*

I declare that the above information is true and accurate, and this form is a contract that accepts the Terms and Conditions as outlined by Trilab Pty Ltd and give consent to proceed with the above specified works.

Name

Signature

Date:

Office Use: Sample Received: / Receipt Sent:

Sample#: G