APEX Research, Inc.

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Client Name: _____
Address: _____
City, St., Zip: _____
Phone: _____ Fax : _____

Date of Survey : _____
Project : _____
Project # : _____
Contact Person: _____

Lab Use Only
Log-In _____
Report _____

Turn Around Times: (Circle One)

Rush 24 hour
48 hour 72 hour
Other : _____ **TTP** _____

Asbestos: Bulk _____ Wipe _____ Point Count _____ PCM _____
Lead: Bulk _____ Wipe _____ Air _____ Paint _____ Soil _____
Mold: Bulk _____ Tape _____ BioSIS _____ Other _____ Viable _____
TEM: AHERA 7400 _____ Bulk/NOB _____ EPA Level II _____

Lab ID #	Client ID #	Material/Location	Volume	Area	Results

Relinquished by: _____ Received by: _____
Date : _____ Date : _____

Relinquished by: _____ Received by: _____
Date : _____ Date : _____

Rev: 12/03
Work Forms: COC