

MICROBE INOTECH LABORATORIES, INC.

Environmental Analysis Request Form

SEND REPORT TO:	SEND INVOICE TO:
ATTENTION: _____	ATTN: ACCOUNTS PAYABLE _____
COMPANY: _____	_____
ADDRESS: _____	_____
_____	_____
PHONE: _____	
FAX: _____	PURCHASE ORDER NUMBER: _____
EMAIL: _____	PROJECT NUMBER: _____
AUTHORIZED SIGNATURE: _____	PROJECT NAME: _____
_____ DATE: _____	
PRINTED : _____	TERMS: NET 30 DAYS
	FINIANCE CHARGES OF 1.5% WILL BE ADDED TO ALL OVERDUE INVOICES
[SIGNATURE AND/OR SAMPLE SUBMISSION INDICATES ACCEPTANCE OF MiL, INC.'S STANDARD TERMS & CONDITIONS]	

SOIL OR WATER SAMPLES

- | | | | |
|---|---|--|---|
| 1 TOTAL HETEROTROPHIC PLATE COUNT WITH PHONE CALL. | 2 TOTAL PLATE COUNT AND GC-FAME/BIOLOG™ IDENTIFICATIONS. | 3 BIOREMEDIATION FEASIBILITY STUDY
_____ WITH CHEMISTRY
_____ WITHOUT CHEMISTRY | 4 CUSTOM MICROBIOLOGY (DETAIL BELOW) |
|---|---|--|---|

ANALYSIS TYPE CIRCLE NUMBER(S)	SAMPLE NAME	AEROBIC		CUSTOM TESTS (IF ANY)	SAMPLE DESCRIPTION/SIZE	COLLECTION DATE/TIME
		A	ANAEROBIC			
1 2 3 4						
1 2 3 4						
1 2 3 4						
1 2 3 4						
1 2 3 4						
1 2 3 4						
1 2 3 4						
1 2 3 4						

LIST SUBSTRATE(S) TO BE USED IN THE ENDPOINT ASSAY: _____

PLEASE CHECK ONE:

- | | |
|---|---|
| <input type="checkbox"/> I WOULD LIKE TO RECEIVE THE SUMMARY REPORT ONLY, NOT THE FULL SET OF DATA (FIRST TIME CLIENTS WILL RECEIVE ALL DATA) | <input type="checkbox"/> SUMMARY TO BE FAXED, DATA SENT BY REGULAR MAIL |
| <input type="checkbox"/> RESULTS TO BE SENT OVERNIGHT - EXTRA SHIPPING CHARGE | <input type="checkbox"/> SUMMARY TO BE FAXED, DATA SENT OVERNIGHT - SHIPPING CHARGE |
| <input type="checkbox"/> REPORT TO BE MAILED REGULAR MAIL | <input type="checkbox"/> SUMMARY TO BE FAXED, DATA SENT OVERNIGHT - SHIPPING CHARGE |
| <input type="checkbox"/> DATA SENT BY REGULAR MAIL, SUMMARY TO BE EMAILED TO: _____@_____ | |

Send **4oz** samples (16 oz for chemistry) and this form to:
the MiL, Inc. 7259 LANSDOWNE AVENUE, SUITE 200 ST. LOUIS MO 63119-3421
 PHONE: (800) 688-9144 FAX: (314) 645-2544