

SAMPLE SUBMITTAL FORM	
EMSL ORDER NUMBER (LAB USE ONL)	Y)

LABORATORY-PRODUCTS-TRAINING								
Your Name: Please include payment with your samples							les.	
Street Address:	☐ Certified Check ☐ Money Order ☐ Credit Card							
Address 2:	If using a credit card, please fill out the							
Province/Territory:							e last	
Province/Territory:  Postal Code:  "Credit Card Authorization" form, which is the page of this document.								
Please Provide Results: ☐ Fax ☐ Email		Phone :	#:		Fax #	<b>#</b> :		
Project ID: EMSL -		Provinc	e/Territor	y where S	Samples C	Collected:		
Email Address:								
Please check time frame results are needed in. The turnaround time starts when the lab receives the samples and payment, whichever is the latter. Please enclose certified check, money order or credit card information. Please note that if your sample has multiple layers, as required by the USEPA, we are required to analyze all layers separately. All pricing is per sample unless otherwise stated.								
ASBESTOS ANALYSIS		TURNA	ROUND (I	Pricing Pe	r Sample	)		
1 Hour	3 Hrs	6 Hrs	24 Hrs	48 Hrs	3 Days	4 Days	1 Week	
BULK SAMPLE - PLM					<u> </u>			
EPA 600/R-93/116 or NYS 198.1 \$315	\$265	\$210	\$1 <b>6</b> 5	\$1 <b>6</b> 0	\$155	\$150	\$130	
Bulk Sample- NOB (floor tiles, roofing, etc.)	<b>4</b> _00	4=.0						
PLM EPA NOB or NYS 198.6*			\$ <del>37</del> 0	\$ <b>2</b> 65	\$ <del>21</del> 0	\$185	\$ <del>16</del> 0	
Settled Dust								
ASTM 5755/ASTM 6480				\$370	\$315	\$290	\$265	
Soil Samples								
PLM CARB 435, Level A				\$ <u>47</u> 5	\$ <u>42</u> 0	<b>\$</b> 370	\$ <u>31</u> 5	
Vermiculite Samples**								
TEM Qualitative via Filtration Technique				\$475	\$420	\$370	\$315	
Drinking Water Sample							 \$24E	
EPA Method 100.2 (fibers >10 microns)							\$315	
*Both 198.6 and 198.4 (additional \$75 charge) must be performed for samples in NYS to be classified as non asbestos containing material. **Samples from New York State not accepted for loose fill vermiculite.								
LEAD ANALYSIS TURNAROUND (Pricing Per Sample)								
DAINT CHIDS WIDES SOIL DUST via ELAME AA	3 Hrs	6 Hrs	24 Hrs	48 Hrs	3 Days	, 4 Days	1 Week	
PAINT CHIPS, WIPES, SOIL, DUST via FLAME AA WATER via GFAA								
	\$300	\$250	\$200	\$175	\$150	\$125	\$ <del>10</del> 0	
MOLD ANALYSIS								
MOLD ANALYSIS	0.11			Pricing Pe			0.14/1-	
	6 Hrs	<u>24 Hrs</u>	<u>48 Hrs</u>	3 Days	4 Days	1 Week	2 Week	
TAPE, BULK, AIR or SWAB - Direct Examination	· L	$\sqcup$			$\sqcup$		با	
	\$370	\$315	\$265	\$210	\$185	\$160	<b>\$130</b>	
BULK, SWAB, AIR or DUST – Culturable Fungi							· L	
\$190								
REAL TIME Q-PCR LABORATORY ANALYSIS AVAILABLE								
PCR-Environmental Relative Moldiness Index (ERMI) 36 Panel Package developed by the EPA and is being studied as a tool to help qualify the moldiness of homes.								
Please visit <u>www.moldinspectionkit.com</u> or call 1-800-220-3675 for more information.								
Radon Testing Available – Please visit <u>www.radontestinglab.com</u> or call 1-800-220-3675 for more								
information.								



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LABORATORY-PRODUCTS-TRAINING	7							
Industrial Hy	giene Laboratory Service	S		TURNA	AROUN	ND (Pri	cing Per	Sample)
Formaldehyde - Air Sample Collect NIOSH Method 201	t <b>on Monitoring Badge</b> 6 Modified	24 Hrs		3 <u>Days</u> \$305 maldehyde		  0  s - \$26		2 Week
Note: Please follow all sampling instructions and paperwork documentation included with the sample badges.								badges.
laminate flooring or products	ff-gas testing from sub-sample or other composite wood	24 Hrs	48 Hrs	3 Days	<u>4 Da</u> □ \$50		<u>Week</u> □ \$420	2 Week 
Note: Please subm	nit a 2 inch by 2 inch sample, or as clo	se in size	as possik	ole. Place the	sampl	e in a s	ealed pla	stic bag.
Formaldehyde – Off-gas testing from intact laminate Flooring or other composite wood products  ASTMD6007-14 Small Chamber Study – EMSL Modified  1 Week 2 Week								
								-
	nall Chamber Study – EMSL Modified aboratory before Sample Submittal		/linimum	Necessary	Samp			-
		for the N	/linimum e of Sam	oler:		le Volu	me and	Mass*
*Please Contact La		for the N		·	Ti		me and	-
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*Please Contact La Name of Sampler:	aboratory before Sample Submittal	for the N		oler: Date	Ti	le Volu	me and	Mass*
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*Please Contact La Name of Sampler:  Sample Number  Total Number of Sample (Clie	Sample Location  amples Sent:	Signatur Sam Date	e of Samp	Date Sampled	Ti Sam	me npled ( / N) Time:	me and	Mass*

EMSL Canada is strictly an analytical laboratory. We can analyze samples by various methods and provide you with a written report, but cannot provide you with any advice as to how to proceed after obtaining results. Due to magnification limitations inherent in PLM, asbestos fibers in dimensions below the resolution capability of PLM may not be detected. The limit of detection as stated in the method is 1%. For assistance with interpretation of your results, you may call your local health department, visit the USEPA website at <a href="https://www.epa.org">www.epa.org</a>, or hire an environmental consultant.

If you would like EMSL Canada to test your sample by PLM EPA Method EPA 600/R-93/116, please send us a sample of the material you want tested in a sealed Ziplock bag (approximately 1 square inch is sufficient), and fill out the attached form. All orders must be prepaid. If you do not wish to use a credit card, include a certified check or money order in the amount that corresponds to the turnaround time you requested, multiplied by the number of samples you submit. Please refer to

www.epa.gov/asbestos/pubs/ashome.html#6 for more information regarding asbestos in your home.

Not all services and/or tests are offered at every EMSL laboratory location. Please contact your local EMSL laboratory to confirm their ability to provide the service/test you require.



## CREDIT CARD AUTHORIZATION FORM

By signing this form and providing your credit card number, you acknowledge the card number and information on the card is valid and was not obtained fraudulently. You authorize EMSL to receive payment for analytical services from the credit card company contemporaneous with the invoice(s). Any disputes regarding quoted prices, results, or other testing issues must be submitted in writing to EMSL management for resolution within 30 days of invoice date. Contact customer service at 1-800-220-3675 for the address. Our policy is to offer in-house credit only for analytical results provided by EMSL under the terms negotiated; cash refunds may be issued on a case-by-case basis. Cardholder is responsible for updating credit card information, as necessary.

## Important Disclaimer

EMSL Canada, Inc. is committed to a security standard policy that protects your credit card data from unauthorized access once this data is in our possession. EMSL does not guarantee the security of your credit card data during the period of transmission (i.e. mail or FAX).

Company Name: (if a	pplicable)		Name on Credit Card:					
☐ Visa ☐ Master Card ☐ American Express			umber:		Exp Date (MM/YY)			
Credit Card Billing Ad	ldress		State/Provin	ce Z	ip/Postal Code			
Security Code								
Cardholder Signature	;		Cardholder Pho	one Number				
For EMSL Use Only:								
Customer Number	Invoice or Order Number	\$ Invo	oice Total	Date				
Credit Card Charged	by: (Print Name)	Cre	dit Card Charge	d by: (Signati	ure)			
Credit Card Authoriza			nments:					