ALS-Analytica Laboratories

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ANALYSIS REQUEST FORM

Zespri Crop Protection Scheme (CPS) - Residue Screening

	Client Information	Chain Of Custody Record		
Name	Required	Date Sent To A	Analytica P	erson Sending
Address	Required	Comments		
Phone	Required			
E-mail	Required			
Contact Person	Required			
Client Reference		Laboratory ID Number		
Quote #	Purchase Order #			
Submitter (if not Client)		Date Received	Received By	Condition
Submitter E-mail		Reported	Invoiced	Sent to Client

	Sample Id	Sample Type For Analysis			
#	Product Name & Manufacturer Name	Batch Number and/or Manufacture Date	Recommended Rate/100 L	Sample Type Solid, Liquid	Test Required
1					Zespri CPS residue screen
2					Zespri CPS residue screen
3					Zespri CPS residue screen
4					Zespri CPS residue screen
5					Zespri CPS residue screen

Samples will be retained for a maximum of 4 weeks following testing. For more information visit <u>www.analytica.co.nz</u> or telephone 07 974 4740. By submitting samples you agree to our <u>Terms and Conditions</u>