

MICROBE INOTECH LABORATORIES, INC.

Environmental Analysis Request Form

| | |
|--|---|
| SEND REPORT TO: ATTENTION: _____ COMPANY: _____ ADDRESS: _____ _____ _____ PHONE: _____ FAX: _____ EMAIL: _____ AUTHORIZED SIGNATURE: _____ _____ DATE: _____ PRINTED : _____ | SEND INVOICE TO: ATTN: ACCOUNTS PAYABLE _____ _____ _____ PURCHASE ORDER NUMBER: _____ PROJECT NUMBER: _____ PROJECT NAME: _____ 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 | A | | | |
| 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"/> RESULTS TO BE SENT OVERNIGHT - EXTRA SHIPPING CHARGE <input type="checkbox"/> SUMMARY TO BE FAXED, DATA SENT BY REGULAR MAIL |
| <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