



Phone: (705) 503-7983
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Chain of Custody and Asbestos Analysis Request Form

Client Information

Company Name:		Phone Number:	
Company Contact:		Email for Results:	
Address:		Invoice Required:	

Project Information

Date Submitted:		Number of Samples:	
Project Name/Number:		PO Number:	
Please Select Turnaround: Regular (2-3 Business Days): <input type="checkbox"/> Rush (24 Hours): <input type="checkbox"/>			

Sample Number	Sample Location	Sample Description
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

☐ AGREE TO ELECTRONIC SIGNATURE (By checking, I consent to signing this Chain of Custody document by electronic signature.)

Lab Use Only

Samples Received By:		Date:	
Samples Relinquished By:		Date:	