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Request for Grading and Lab Service

(All analyses apply to submitted sample(s) only)

Submitted by: _____

Date: _____

Location: _____

Phone: _____

Bill to: _____

Fax: _____

Results to: _____

Total Number of Samples: _____

Email Address: _____

Results to be received by: ☐ Email ☐ Fax

Please check requested service

* Grading includes: grade, reason for grade, protein, position in grade and other requested factors

* For moisture tests, sample must be in a sealed moisture proof container

Sample ID	Commodity	Grading (500gm) CGC (CDN)	Grading (500gm) FGIS (US)	Falling Number Hagberg (300 gm)	DON ELISA / Reveal Q+ (200 gm)	Other analysis (specify)
Complete this line if all samples require same analysis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments / Special instructions: _____