



CONCRETE CHAIN OF CUSTODY & TEST REQUEST

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CLIENT		INVOICE (complete if different from Client)	
Company:		Company:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Contact:	Phone:	Contact:	Phone:
E-mail:	Cell:	E-mail:	Cell:
PROJECT			
Project Name:		Client Project #:	Purchase Order#:
Project Location:		GTX Sales Order #:	Requested Turnaround:
On-site Contact:		E-mail:	Phone:

CONCRETE			Compressive Strength of CYLINDERS (ASTM C39/AASHTO T 22)	Compressive Strength of CONCRETE CORES (ASTM C 42)	Petrographic Analysis of Concrete	Chloride Ion Analysis	Other:	Other:	Other:	Other:	Other:	Other:	Other:	Other:	Other:	Other:	Other:	Other:	
Core ID	Sample ID	Depth																	

*Specify Test Conditions (Undisturbed or Remolded, Density and Moisture, Test Normal Loads, Test Confining Stresses, etc.):

AUTHORIZE BY SIGNING AND DATING:	For GTX Use Only Incoming Sample Inspection Performed Adverse conditions: _____
SIGNATURE: _____ PRINT NAME: _____ DATE: _____	

Relinquished By: _____	DATE: _____ TIME: _____	Received By: _____	DATE: _____ TIME: _____
Relinquished By: _____	DATE: _____ TIME: _____	Received By: _____	DATE: _____ TIME: _____