



**OSTREA MINERAL
LABORATORIES, INC.**

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Document Title:

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DOCUMENT FORM

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Customer :	_____	RAN No. :	_____
Address :	_____		
Contact Person :	_____	Email Address :	_____
Telephone No. :	_____	Fax No. :	_____
Payment :	<i>Received the amount of:</i> _____	For: <input type="checkbox"/> deposit only <input type="checkbox"/> Partial payment <input type="checkbox"/> Full payment	in the form of: <input type="checkbox"/> Cash <input type="checkbox"/> Check Bank: _____ Branch: _____

Sample Description	Required Analysis	Charges	Remarks

Applicable Requirements :

Date sampled: _____
MSDS from customer? no yes
Government Standard in the CAN? no yes

Sampling:
 Collected by OMLI
 Pick-up samples
 Submitted by Customer

Standard:	Class:
<input type="checkbox"/> DAO 2016 (Effluent)	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> SB <input type="checkbox"/> SC <input type="checkbox"/> SD
<input type="checkbox"/> DAO 2016 (WQG) Water Quality Guidelines	<input type="checkbox"/> AA <input type="checkbox"/> B <input type="checkbox"/> D <input type="checkbox"/> SB <input type="checkbox"/> SD <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> SA <input type="checkbox"/> SC
<input type="checkbox"/> DAO 22 (TCLP)	
<input type="checkbox"/> PNSDW 2017	

Instructions from customer:
 Pls return to us the reject samples
 Pls send results by: fax e-mail
 Pls call us when CAN is available for pick-up at: Laguna Valero Plaza

Special Instructions:

Submitted by: _____ (customer name & signature)	Received by: _____ (name & signature)	Reviewed by: _____ (name & signature)
Date & Time: _____	Date & Time: _____	Date & Time: _____