



IVS Labs ENVIRO TEST REQUEST FORM

Please complete all details when sending samples for analysis.

COMPANY NAME

Company Name:

Postal/Delivery Address:

Person Requesting Testing:

Contact Phone:

Contact Email:

INVOICING DETAILS

Accounts Person:

Accounts Email:

TESTING REQUIREMENTS

Sample Type/s: Soil Water Other

Number of samples:

SOIL	WATER	OTHER
<input type="text"/>	<input type="text"/>	<input type="text"/>

IVS Sampled Self-sampled

TESTS REQUIRED (tick all that apply)

Water

pH

Conductivity

Turbidity

COD

BOD

Metals in Water

Organic Molecules in Water

Soil

pH

Conductivity

Metals in Soil

Organic Molecules in Soil

Other *Contact the Lab to discuss.*

Do you need IANZ Accreditation?:

Yes No

Additional Information:

Please submit via email to: treatment@ivs.co.nz