

Sample Submittal Form

Vendor/Supplier Info	Date sample obtained: _____
Company name: _____	
Site address: _____	
City: _____	State: _____ Zip: _____
Mailing address (if different than above): _____	
City: _____	State: _____ Zip: _____
Phone: _____	Fax: _____
Contact: _____	
Email: _____	
Preferred pick up hours: _____	

Material Description & General Properties		
Name of Material: _____		
<i>Please submit a ONE-POUND REPRESENTATIVE SAMPLE & clearly mark the container as to its content. When obtaining samples of plastic, please be sure to indicate the type. If you accumulate steel shot and shot dust separately, please obtain separate samples.</i>		
Process Generating Material: _____		
Proper DOT shipping Name: _____		
Packaging (must be on pallets): _____ <i>(55-gal drums, 30-gal fiber drums, gaylords, super sacks, etc.)</i>	Container type: _____ <i>(metal, fiber, plastic, etc)</i>	
On Hand: Pounds _____ <i>(estimated or actual)</i>	Packages _____	
Frequency: _____ <i>(weekly, monthly, quarterly, yearly, one time only)</i>	Pounds _____ <i>(estimated or actual)</i>	Packages _____
Analytical <i>(attach copies)</i> : Chemical (oxides): _____ TCLP: _____ MSDS: _____		
Material Composition <i>(estimate or actual)</i> :	Minimum	Maximum
_____	_____ %	_____ %
_____	_____ %	_____ %
_____	_____ %	_____ %
_____	_____ %	_____ %
_____	_____ %	_____ %
_____	_____ %	_____ %
TOTAL MUST ADD UP TO 100%		

FOR OFFICE USE ONLY	
Code#: _____	Sales Rep: _____