



**SHIPPING ADDRESS:  
TRI/Environmental, Inc.**

A Texas Research International Company  
9063 Bee Caves Road, Austin, Texas 78733-6201

**GEOSYNTHETICS TESTING LABORATORIES**

**1-800-880-8378  
FAX: 512 263 2558**

**CHAIN OF CUSTODY/TEST REQUEST FORM - for GEOSYNTHETIC CLAY LINERS (GCLs)**

Page \_\_\_\_ of \_\_\_\_

<b>REPORT RESULTS TO:</b>	<b>Client Name:</b>	Client Phone/Fax:
	<b>Client Company:</b>	Client Field Phone/Fax:
	<b>Project Name:</b>	Project Number:
	Client Mailing Address:	E-mail:
	Client City, State, Zip	Shipped by: _____ Date: _____

<b>SEND INVOICE TO:</b>	<b>COMPLETE ONLY IF DIFFERENT FROM ABOVE</b>		Phone:
	<b>Client Name:</b>		Fax:
	<b>Client Company:</b>		<b>Client P.O. #:</b>
	Client Mailing Address:		<b>E-mail:</b>
	Client City, State, Zip		Shipped by: _____ Date: _____

<b>GCLs</b>		Thickness (ASTM D5199)	Bentonite Moisture Content (ASTM D4643) or	Bentonite Swell Index (ASTM D5890) or	Bentonite Fluid Loss (ASTM D5891) or	Permeability / Hydraulic Conductivity (ASTM D5887, D5084, mod., GRI GCL2) please circle method	Grab Tensile Strength (ASTM D 4632, mod.)	Wide Width Tensile (ASTM D4595, mod.)	Peel Strength (ASTM D6496 or 4632, mod.)	Mass per Unit Area @ 0% M.C. (ASTM D 5993) or	Internal Shear (ASTM D6243/5321) - see below **	Other:
Product Designation (manufacturer, thickness, polymer, etc.)	Sample ID											
	1											
	2											
	3											
	4											
	5											
	6											
	7											
	8											
	9											
	10											

Remarks:

**INTERNAL SHEAR INSTRUCTIONS: (from above) \*\***

1	<b>Normal Compressive Load(s):</b> (NOTE: For interface friction, use interface friction/direct shear Chain of Custody/Test Request Form)	Load 1	Load 2	Load 3	<b>Load units: (please check/write in)</b> psi    psf    other:		
2	<b>Strain/Shear Rate:</b> NOTE: 0.04 in/min is default strain rate from ASTM D5321	0.04 in/min			Other: (please include units)		
3	<b>Conditioning Instructions (hydration time, hydration load, etc.)</b>						

Logged In By: \_\_\_\_\_

"As-Received" Notes:

TRI Log. Number:
Due Date:

**PLEASE AUTHORIZE BY SIGNING AND DATING BELOW.**

NAME: \_\_\_\_\_

SIGNATURE/DATE: \_\_\_\_\_