



SHIPPING ADDRESS:
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A Texas Research International Company
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GEOSYNTHETICS TESTING LABORATORIES
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CHAIN OF CUSTODY/TEST REQUEST FORM - for ROLLED EROSION CONTROL PRODUCTS

Page ____ of ____

SEND REPORT AND INVOICE TO:	Client Name:	Phone:
	Client Company:	Fax:
	Project:	E-mail:
	Client Mailing Address:	Client PO:
	Client City, State, Zip	Shipped by: Date:

Rolled Erosion Control Products		Thickness (ASTM D6525)	Mass/Area (ASTM D6566)	Resiliency (ASTM D6524)	Specific Gravity / Density (ASTM D792)	Porosity (ECTC's TASC 00197)	Open Volume/Unit Area (ECTC's TASC 00197)	Water Absorption (ASTM D1117, mod. Per ECTC's TASC 00197)	Swell (ECTC's TASC 00197)	Stiffness (ASTM D 6575)	Light Penetration / Percent Shading (ECTC's TASC 00197)	Smolder Resistance (ECTC's TASC 00197)	Strip Tensile Properties - DRY (ASTM D 5035, mod. By ECTC's TASC 00197)	Strip Tensile Properties - WET (ASTM D 5035, mod. By ECTC's TASC 00197)	Wide Width Tensile Properties - DRY (ASTM D 4595)	Wide Width Tensile Properties - WET (ASTM D 4595)	Other:	
Product Designation (manufacturer, thickness, polymer, etc.)	Sample ID																	
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		

Remarks:

Logged In By:	
"As-Received" Notes:	
	TRI Log. Number: Due Date: Distribution: Yellow: Client: White: TRI

PLEASE AUTHORIZE BY SIGNING AND DATING BELOW.

NAME: _____	SIGNATURE/DATE: _____
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