REQUEST FOR LABORATORY SERVICES

Advanced Terra Testing
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Client ____________________ Job Number ____________________

Project Name ____________________ Project Number ____________________

Project Manager ____________________ Location ____________________

Results Required By ____________________ Date ____________ Page ____ of ____

ADVANCED TERRA TESTING

			GRADATION			ATT. LIMITS		MOIST./DEN.			PROCTOR		PERMEABILITY				TRIAXIAL SHEAR			Other Testing Required						
Sample ID	DEPTH	Sample Type	Mech GSA ASTM D 6913	Hydrometer ASTM D 422	Minus 200 ASTM D 1140	One Pt. ASTM D 4318	Three Pt. ASTM D 4318	Moisture ASTM D 2216	Density ASTM D 2937	Irreg. Shape ASTM D 4531	Std. Proctor ASTM D 698	Mod. Proctor ASTM D 1557	Flex Wall ASTM D 5084	Conf. Pressure	Rigid Wall ASTM D 2434	Load (specify)	TX/CUpp ASTM D 4767	TX/UU ASTM D 2850	TX/CD ASTM D 7181	Sp. Gravity ASTM D 854	UCS ASTM D 2166	1-D Consol. ASTM D 2435	Direct Shear ASTM D 3080	Swell/Consol ASTM D 4546		Remarks

Sample Type: **Bag** - Small/Medium Baggie, **BKT** - Bulk Bucket Material, **Cal** - California Liner, **ST** - Shelby Tube

Comments: