

	<b>Request for Laboratory Services and CHAIN OF CUSTODY (Mining)</b>										
	SGS Environmental Services - Lakefield: 185 Concession St., Lakefield, ON K0L 2H0 Phone: 705-652-2000 Toll Free: 877-747-7658 Fax: 705-652-6365 Web: www.ca.sgs.com {4}										
	SGS Environmental Services - London: 657 Consortium Court, London, ON, N6E 2S8 Phone: 519-672-4500 Toll Free: 877-848-8060 Fax: 519-672-0361 Web: www.ca.sgs.com {4}										
<b>Laboratory Information Section</b>											
Received Date (mm/dd/yyyy):      /      /						LAB LIMS #:					
Skid # (if applicable):						Temperature Upon Receipt (°C):					
<b>Billing &amp; Reporting Information</b>											
Invoice/Receipt to {3}:	Company:					Quote #:					
	Attention:					Attached Parameter List: <input type="checkbox"/> YES <input type="checkbox"/> NO					
	Address:					<b>Turnaround Time</b>					
	Email:					Is *Rush Turnaround Time Required? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Project Name/Number:						P.O. #:		Specify:			* Rush TA Requests Require Lab Approval
<b>Client Information/Report To:</b>										<b>Client Lab #:</b>	
Company Name:					Phone Number:						
Contact Name:					Fax Number:						
Address:					E-mail:						
Copy to:											
Samples will be sent to disposal after 3 months unless otherwise requested. Additional storage and shipping costs will be <u>charged to the client</u> . If the samples should be returned, please provide courier account information.											
After analysis samples are to be:		Disposed *Default* <input type="checkbox"/>			Stored (At client's cost) <input type="checkbox"/>			Multi-phase project (Automatic storage) <input type="checkbox"/>			
Returned to client <input type="checkbox"/>		Return courier:			Acct:						
<b>IMPORTANT: If samples contain known Hazards, please label accordingly and identify below:</b>											
<input type="checkbox"/> NORM (Normally Occurring Radioactive Material) <input type="checkbox"/> Asbestos <input type="checkbox"/> Other:											
Special Instructions : <input type="checkbox"/> See Attached or:											
<b>Sample Information</b>											
Sample Identifier	Date Sampled (mm/dd/yy)	Time Sampled	# of Containers	Analysis Requested (please enter the analysis required below and check off which analysis applies to each sample)							
Sampled By {1}: (Name)		(Signature)			Date:      /      /		(mm/dd/yy)				
Relinquished by {2}: (Name)		(Signature)			Date:      /      /		(mm/dd/yy)				
<b>Note:</b> {1} Submission of samples to SGS is acknowledgement that you have been provided direction on sample collection/handling and transportation of samples. {2} Submission of samples to SGS is considered authorization for completion of work. Signatures may appear on this form or be retained on file in the contract, or in an alternative format (e.g. shipping documents). {3} Results may be sent by email to an unlimited number of addresses for no additional cost. Fax is available upon request. {4} Completion of work may require the subcontracting of samples between the London and Lakefield laboratories.											
This document is issued by the Company under its General Conditions of Service accessible at <a href="http://www.sgs.com/terms_and_conditions.htm">http://www.sgs.com/terms_and_conditions.htm</a> . (Printed copies are available upon request.) Attention is drawn to the limitation of liability, indemnification and jurisdiction issues defined therein.											