

Contact name: _____
Company: _____

Mobile: _____

Report (via post or email)

Street: _____

State: _____

Suburb: _____

Postcode: _____

or

Email: _____

Number of
Samples: _____

Disposal: Discard after ___ month/s Return to client Other _____

Turnaround time: Standard Urgent (surcharge applies, please contact us prior to submission)

Sample Marks/ID No. (use sequential numbering)	Date Sampled	Sample Type	Work Required and / or Comments

By signing the authorisation below, you agree to the charge stated in formal documentation, or a minimum charge of \$500 ex. GST.
I accept ChemCentre's [Terms of Analysis](#) and ChemCentre is hereby authorised to proceed.

Signed: _____

Witness: _____

Name: _____

Date: _____

Once completed, please attach to your samples and either:

Post to Attn: Forensic Science Laboratory, ChemCentre, PO Box 1250, BENTLEY DC WA 6983, or

Hand deliver or courier to ChemCentre's Forensic Science Laboratory reception located on Level 2, Resources and Chemistry Precinct, Corner Manning Road and Townsing Drive, Bentley, Western Australia, 6102

Office Use Only

Receiving Officer:		Lab Numbers:	
Received (date, time):		Receipt Number:	