

# HUFFMAN

## LABORATORIES, INC.

Quality Analytical Services Since 1936  
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# ANALYTICAL SERVICES REQUEST FORM

**INSTRUCTIONS:** Use one form for each sample or group of similar samples requiring the same analyses. Check the box for each service / analysis required and fill in the expected values and units of the analytes of interest.

**Fill in the form as completely as possible. Use reverse side if needed.**

Client Name \_\_\_\_\_

Sample #(s): \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

FAX # \_\_\_\_\_

Email: \_\_\_\_\_

PO #/ Credit Card # \_\_\_\_\_

Name on Card \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

Sample Description/Matrix: **(IMPORTANT!)**

m.p. \_\_\_\_°C b.p. \_\_\_\_°C Hygroscopic Y / N Hazardous Y / N  
 Soluble in \_\_\_\_\_ Sensitive to \_\_\_\_\_ Explosive Y / N

**All samples will be returned<sup>†</sup> unless marked for municipal disposal.**

Return Sample  I certify that samples can be disposed of in municipal waste system.

Report Results by  mail  FAX  phone  email

SERVICE	MICROANALYSIS	Expected Value %	WATER ANALYSIS	Expected Value mg/l	METALS	Expected Value/Units	METALS	Expected Value/Units
<input type="checkbox"/> Standard	<input type="checkbox"/> Carbon	_____	<input type="checkbox"/> Acidity	_____	<input type="checkbox"/> Aluminum*	_____	<input type="checkbox"/> Rhodium	_____
<input type="checkbox"/> Priority <sup>†</sup> (~5 working days)	<input type="checkbox"/> Hydrogen	_____	<input type="checkbox"/> Alkalinity, Total	_____	<input type="checkbox"/> Antimony*	_____	<input type="checkbox"/> Rubidium	_____
<input type="checkbox"/> High Priority <sup>†</sup> (~2 working days)	<input type="checkbox"/> Nitrogen (Dumas)	_____	<input type="checkbox"/> OH <sup>-</sup> , CO <sub>3</sub> <sup>2-</sup> , HCO <sub>3</sub> <sup>-</sup>	_____	<input type="checkbox"/> Arsenic*	_____	<input type="checkbox"/> Ruthenium	_____
<b>Check for availability of priority services prior to submittal.</b>	<input type="checkbox"/> Nitrogen (Kjeldahl)	_____	<input type="checkbox"/> Bromide	_____	<input type="checkbox"/> Barium*	_____	<input type="checkbox"/> Samarium	_____
<b>REPORT RESULTS</b>	<input type="checkbox"/> Oxygen	_____	<input type="checkbox"/> Carbon Dioxide	_____	<input type="checkbox"/> Beryllium*	_____	<input type="checkbox"/> Scandium	_____
<input type="checkbox"/> As Received	<input type="checkbox"/> Oxygen (Merz)	_____	<input type="checkbox"/> Chloride	_____	<input type="checkbox"/> Bismuth	_____	<input type="checkbox"/> Selenium*	_____
<input type="checkbox"/> Dry Wt. Basis	<input type="checkbox"/> Sulfur	_____	<input type="checkbox"/> Conductivity	_____	<input type="checkbox"/> Boron*	_____	<input type="checkbox"/> Silicon*	_____
<input type="checkbox"/> Other	Halogens	_____	<input type="checkbox"/> Fluoride	_____	<input type="checkbox"/> Bromine	_____	<input type="checkbox"/> Silver*	_____
	<input type="checkbox"/> Fluorine	_____	<input type="checkbox"/> Iodide	_____	<input type="checkbox"/> Cadmium*	_____	<input type="checkbox"/> Sodium*	_____
	<input type="checkbox"/> Chlorine	_____	<input type="checkbox"/> N-Ammonia	_____	<input type="checkbox"/> Calcium*	_____	<input type="checkbox"/> Strontium*	_____
	<input type="checkbox"/> Bromine	_____	<input type="checkbox"/> N-Nitrate	_____	<input type="checkbox"/> Cerium	_____	<input type="checkbox"/> Sulfur	_____
	<input type="checkbox"/> Iodine	_____	<input type="checkbox"/> N-Nitrite	_____	<input type="checkbox"/> Cesium	_____	<input type="checkbox"/> Tantalum	_____
<b>QA/QC REPORTING</b>	<input type="checkbox"/> Ash	_____	<input type="checkbox"/> N-TKN	_____	<input type="checkbox"/> Chromium*	_____	<input type="checkbox"/> Tellurium	_____
<input type="checkbox"/> Raw Data with associated QC <sup>†</sup>	<input type="checkbox"/> Dry	_____	<input type="checkbox"/> pH	_____	<input type="checkbox"/> Cobalt*	_____	<input type="checkbox"/> Terbium	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Sulfated	_____	<input type="checkbox"/> o-Phosphate	_____	<input type="checkbox"/> Copper*	_____	<input type="checkbox"/> Thallium*	_____
	<input type="checkbox"/> Carbonate Carbon	_____	<input type="checkbox"/> P-Total	_____	<input type="checkbox"/> Dysprosium	_____	<input type="checkbox"/> Thorium	_____
<b>SAMPLE PREP<sup>†</sup></b>	<input type="checkbox"/> TOC (difference)	_____	<input type="checkbox"/> Silica, Dissolved	_____	<input type="checkbox"/> Erbium	_____	<input type="checkbox"/> Thulium	_____
<input type="checkbox"/> Grind	<input type="checkbox"/> TOC (acidification)	_____	<input type="checkbox"/> Solids-TDS	_____	<input type="checkbox"/> Europium	_____	<input type="checkbox"/> Tin*	_____
<input type="checkbox"/> Homogenize	<b>COAL / BIOMASS ANALYSIS</b>	<b>Expected Value %</b>	<input type="checkbox"/> Solids-TSS	_____	<input type="checkbox"/> Gadolinium	_____	<input type="checkbox"/> Titanium*	_____
<input type="checkbox"/> Filter	<input type="checkbox"/> Ash	_____	<input type="checkbox"/> Solids-TS	_____	<input type="checkbox"/> Gallium	_____	<input type="checkbox"/> Tungsten	_____
<input type="checkbox"/> Extract in _____	<input type="checkbox"/> Ash Analysis	_____	<input type="checkbox"/> Solids-TVS	_____	<input type="checkbox"/> Germanium	_____	<input type="checkbox"/> Uranium	_____
<input type="checkbox"/> Dry	<input type="checkbox"/> BTU	_____	<input type="checkbox"/> S-Sulfate	_____	<input type="checkbox"/> Gold	_____	<input type="checkbox"/> Vanadium*	_____
<input type="checkbox"/> Temp _____°C	<input type="checkbox"/> Carbon Dioxide	_____	<input type="checkbox"/> S-Sulfide	_____	<input type="checkbox"/> Hafnium	_____	<input type="checkbox"/> Ytterbium	_____
<input type="checkbox"/> Vacuum <sup>†</sup> or <input type="checkbox"/> Air	<input type="checkbox"/> Moisture	_____	<input type="checkbox"/> S-Sulfite	_____	<input type="checkbox"/> Holmium	_____	<input type="checkbox"/> Yttrium	_____
<input type="checkbox"/> for _____ hours	<input type="checkbox"/> Proximate	_____	<input type="checkbox"/> S-Thiosulfate	_____	<input type="checkbox"/> Indium	_____	<input type="checkbox"/> Zinc*	_____
<input type="checkbox"/> Constant Weight <sup>†</sup>	<input type="checkbox"/> Sulfur	_____	<input type="checkbox"/> S-Total	_____	<input type="checkbox"/> Iodine	_____	<input type="checkbox"/> Zirconium	_____
<input type="checkbox"/> Report Weight Loss <sup>†</sup>	<input type="checkbox"/> Sulfur Forms	_____	<input type="checkbox"/> Thiocyanate	_____	<input type="checkbox"/> Iridium	_____	*Included in ICP-AES Scan	
<input type="checkbox"/> Other Instructions	<input type="checkbox"/> Sulfur Ultimate	_____	<input type="checkbox"/> Turbidity	_____	<input type="checkbox"/> Iron*	_____	<b>ICP SCANS</b>	
	<input type="checkbox"/> Direct Oxygen	_____	<input type="checkbox"/> UV absorbance	_____	<input type="checkbox"/> Lanthanum	_____	<input type="checkbox"/> ICP-AES Scan (~30 elements)	
<b>SAMPLE HANDLING</b>	<input type="checkbox"/> Oxygen by Difference	_____	<b>OTHER</b>	<b>Expected Value/Units</b>	<input type="checkbox"/> Lead*	_____	<input type="checkbox"/> ICP-MS Scan (~60 elements)	
<input type="checkbox"/> Handle Under N <sub>2</sub> <sup>†</sup>	<b>ORGANIC CARBON ANALYSIS</b>	<b>Expected Value/Units</b>	<input type="checkbox"/> Nitrogen (chemiluminescence)	_____	<input type="checkbox"/> Lithium*	_____	<input type="checkbox"/> ICP-MS and -AES Scan	
<input type="checkbox"/> Store at 4°C	<input type="checkbox"/> DOC	_____	<input type="checkbox"/> Nitrogen, Basic	_____	<input type="checkbox"/> Lutetium	_____	<b>ION CHROMATOGRAPHY</b>	
<input type="checkbox"/> Store in Freezer	<input type="checkbox"/> TOC	_____	<input type="checkbox"/> Free Sulfur	_____	<input type="checkbox"/> Magnesium*	_____	<input type="checkbox"/> Anion Scan	
Special Instructions	<input type="checkbox"/> TC	_____	<input type="checkbox"/> Calorimetry (BTU)	_____	<input type="checkbox"/> Manganese*	_____	<input type="checkbox"/> Specific Ions - select from	
	<input type="checkbox"/> DOC Fractionation	_____	<input type="checkbox"/> Density	_____	<input type="checkbox"/> Mercury	_____	<b>WATER ANALYSIS</b> or specify below	
	<input type="checkbox"/> Humic & Fulvic as C	_____	<input type="checkbox"/> Flash Point	_____	<input type="checkbox"/> Molybdenum*	_____		
	<input type="checkbox"/> Humic, Fulvic & Humic As C	_____	<input type="checkbox"/> Melt Point	_____	<input type="checkbox"/> Neodymium	_____		
	<input type="checkbox"/> Humic (Calif. Method)	_____	<input type="checkbox"/> Mole Wt. (VPO)	_____	<input type="checkbox"/> Nickel*	_____		
	<b>ORGANIC HALOGEN ANALYSIS</b>	<b>Expected Value/Units</b>	<input type="checkbox"/> Solvent	_____	<input type="checkbox"/> Niobium	_____		
	<input type="checkbox"/> TOX (water)	_____	<input type="checkbox"/> Water (Karl Fischer)	_____	<input type="checkbox"/> Osmium	_____		
	<input type="checkbox"/> EOX (solid)	_____	<input type="checkbox"/> Other (list)	_____	<input type="checkbox"/> Palladium	_____		
	<input type="checkbox"/> TX	_____			<input type="checkbox"/> Phosphorus*	_____		
					<input type="checkbox"/> Platinum	_____		
					<input type="checkbox"/> Potassium*	_____		
					<input type="checkbox"/> Praseodymium	_____		
					<input type="checkbox"/> Rhenium	_____		

<sup>†</sup>Indicates additional charge

Please Check box if you have provided more information on reverse side.