



## AGGREGATE CHAIN OF CUSTODY & TEST REQUEST

| CLIENT            |         |
|-------------------|---------|
| Company:          |         |
| Address:          |         |
| City, State, Zip: |         |
| Contact:          | E-mail: |
| Phone:            | Fax:    |

| PROJECT           |                   |
|-------------------|-------------------|
| Project Name:     |                   |
| Address:          | Client Project #: |
| City, State, Zip: |                   |
| On-site Contact:  | E-mail:           |
| Phone:            | Fax:              |

**GeoTesting Express, Inc.**  
 125 Nagog Park  
 Acton, MA 01720  
 800 434 1062 Toll Free  
 978 635 0266 Fax

| INVOICE (complete if different from client) |         |
|---|---------|
| Company:                                    |         |
| Address:                                    |         |
| City, State, Zip:                           |         |
| Contact:                                    | E-mail: |
| Phone:                                      | Fax:    |

| GENERAL           |   |
|-------------------|---|
| Purchase Order #: | GTX Sales Order #:  |
| Shipped By:       | Date Shipped:   |
| Mode of Shipment: | Requested Turnaround:   |
| Send Results To:  | <input type="checkbox"/> CLIENT OFFICE <input type="checkbox"/> PROJECT OFFICE  |
| Send Results Via: | <input type="checkbox"/> E-MAIL <input type="checkbox"/> FAX <input type="checkbox"/> VERBAL <input type="checkbox"/> HARD COPY |

2662 Holcomb Bridge Road, Suite 310  
 Alpharetta, GA 30022  
 770 645 6575 Tel  
 770 645 6570 Fax

[www.geotesting.com](http://www.geotesting.com)

| AGGREGATE |   | Calcium Carbonate Content of Aggregate (ASTM D 3042) | Flat and Elongated Particles (ASTM D 4791)<br>*specify ratio below | L.A. Abrasion (small sized aggregate) (ASTM C 131/T 96)<br>*provide 2 five-gallon buckets | L.A. Abrasion (large sized aggregate) (ASTM C 535)<br>*provide 2 five-gallon buckets | Lightweight Pieces in Aggregate (ASTM C 123/T 113) | Organic Impurities in Fine Aggregate (ASTM C 40/T 21) | Percent Passing #200 Sieve (ASTM C 117/T 11) | Sieve Analysis for Course Aggregate (ASTM C 136/T 27) | Soundness of Aggregate (ASTM C 88/T 104)<br>*specify Magnesium Sulfate or Sodium Sulfate; includes 5 cycles | Specific Gravity and Absorption of Course Aggregate (ASTM C 127/T 255) | Specific Gravity and Absorption of Fine Aggregate (ASTM C 128/T 84) | Total Moisture of Aggregate (ASTM C 566/T 255) | Unit Weight and Voids in Aggregate (ASTM C 29/T 19) | Other: _____ | Other: _____ | Other: _____ | Other: _____ | Other: _____ | Other: _____ |
|-----------|---|--|--|---|--|--|---|--|---|---|--|---|--|---|--------------|--------------|--------------|--------------|--------------|--------------|
| Sample ID | *please include boring # and depth if known |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 1         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 2         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 3         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 4         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 5         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 6         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |
| 7         |   |  |  |   |  |  |   |  |   |   |  |   |  |   |              |              |              |              |              |              |

\*Specify Test Conditions (Undisturbed or Remolded, Density and moisture, Test Normal Loads, Test Confining Stresses, etc.):

|                                  |                   |             |
|----------------------------------|-------------------|-------------|
| AUTHORIZE BY SIGNING AND DATING: |                   |             |
| SIGNATURE: _____                 | PRINT NAME: _____ | DATE: _____ |

Incoming Sample Inspection Performed

Adverse conditions: \_\_\_\_\_

|                  |       |              |       |
|------------------|-------|--------------|-------|
| Relinquished By: | DATE: | Received By: | DATE: |
|                  | TIME: |              | TIME: |
| Relinquished By: | DATE: | Received By: | DATE: |
|                  | TIME: |              | TIME: |