



SOIL CHAIN OF CUSTODY & TEST REQUEST

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

2358 Perimeter Park Drive, Suite 320
 Atlanta, GA 30341
 770 645 6575 Tel
 770 645 6570 Fax

www.geotesting.com

CLIENT		INVOICE (complete if different from Client)	
Company:		Company:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Contact:	Phone:	Contact:	Phone:
E-mail:	Cell:	E-mail:	Cell:
PROJECT			
Project Name:		Client Project #:	Purchase Order#:
Project Location:		GTX Sales Order #:	Requested Turnaround:
On-site Contact:		E-mail:	Phone:

SOIL			Atterberg Limits (ASTM D 4318)	USCS - Classification (ASTM D 2487)	Grain Size: ASTM D 6913 Sieve Only Sieve & Hydrometer	Density (ASTM D 7263)	Moisture Content (ASTM D 2216)	Organic Content (ASTM D 2974)	pH: ASTM D 4972 ASTM G 51	Specific Gravity (ASTM D 854)	Electrical Resistivity: ASTM G 57 AASHTO T 288	Proctor Compaction. Standard fit ASTM D 698 Modified fit ASTM D 1557	California Bearing Ratio * (ASTM D 1883)	Direct Shear* (ASTM D 3080)	Triaxial Shear * UU fit ASTM D 2850 CU fit ASTM D 4767 CD fit ASTM D 7181	Incremental Consolidation* (ASTM D 2435)	Permeability/ Hydraulic Conductivity* Fixed Wall fit ASTM D 2434 Flexible Wall fit ASTM D 5084	Unconfined Compression (ASTM D 2166)	Other: _____ _____	Other: _____ _____		
Boring ID	Sample ID	Depth																				

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

AUTHORIZE BY SIGNING AND DATING:	For GTX Use Only Incoming Sample Inspection Performed Adverse conditions: _____
SIGNATURE: _____ PRINT NAME: _____ DATE: _____	

Relinquished By:	DATE:	Received By:	DATE:
	TIME:		TIME:
Relinquished By:	DATE:	Received By:	DATE:
	TIME:		TIME: