



# Request for Analysis

## Activation Namibia (PTY) Ltd.



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Carrier: \_\_\_\_\_ Waybill #: \_\_\_\_\_ # of Packages: \_\_\_\_\_ # of Samples: \_\_\_\_\_

**FOR OFFICE USE ONLY** Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_ Initial: \_\_\_\_\_

Batch ID: \_\_\_\_\_ Invoice #: \_\_\_\_\_

**Priority:**  Normal (may vary depending on package and time of year - please enquire)  
 RUSH (required by) \_\_\_\_\_  
 (Note: subject to surcharge, method dependent)

Confirmation of Sample Receipt:  Yes  No  
 By: E-mail: \_\_\_\_\_  
 or Fax: \_\_\_\_\_

**Client Info:** Client Batch #: \_\_\_\_\_ Shipment #: \_\_\_\_\_

Quote #, PO #, Proforma #: \_\_\_\_\_ Project: \_\_\_\_\_

Company: _____ Attn: _____ Address: _____  Phone : _____ Fax: _____ E-mail: _____	Additional Report to: _____ Company: _____ Address: _____  Phone : _____ Fax: _____ E-mail: _____
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**Method of Payment: For all clients, unless credit has been established, a suitable form of payment must be received before results will be released.**

Payment is included (make cheque or bank draft payable to Activation Laboratories Ltd.)  
 Charge to NEW Credit Card (details are provided on this form in the box to the right).  
 Charge to Credit Card on file with Actlabs.  
 Credit has been established with Activation Laboratories Ltd. (refer to Actlabs' Credit Application Form). Payment will be issued after invoice has been received.

Visa  MasterCard  AMEX

Number: \_\_\_\_\_  
 Expiry Date: \_\_\_\_\_  
 CVV: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Reporting & Invoicing Instructions: Reports and invoices are *emailed* unless otherwise indicated.**

Invoice:  Hard copy  1st Address  2nd Address  
 Report:  Hard copy  1st Address  2nd Address

Retain credit card information to charge this work order and all future work orders.

**Storage:**

*Please Note:* License required for the return of radioactive material - cost per shipment is \$200.00 + shipping. Under CFIA regulations, soil, sediment and vegetation samples from outside Canada require incineration prior to disposal; additional charges will apply.

	Return		Dispose (\$0.45/sample)	Store
Rejects	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 60 days	<input type="checkbox"/> After 60 days	<input type="checkbox"/> \$0.30/sample/month
Pulps	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 90 days	<input type="checkbox"/> After 90 days	<input type="checkbox"/> \$0.15/sample/month
Sieve	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 3 months	<input type="checkbox"/> After 3 months	<input type="checkbox"/> \$0.20/sample/month
Irrads	<input type="checkbox"/> After Analysis	<input type="checkbox"/> After 30 days	<input type="checkbox"/> After 30 days	<input type="checkbox"/> \$0.20/sample/month

<b>Return Samples To:</b> Company: _____ Address: _____  Attn : _____ Phone: _____	<b>Method of Sample Return:</b> <input type="checkbox"/> At cost + 15% (client will be invoiced) <input type="checkbox"/> Our Carrier Account: Carrier Name: _____ Account #: _____ Phone: _____
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**Special Instructions/Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

For samples requiring Geochronology and/or Isotopic Geochemistry, please be sure to include the following information:

- Rock type: \_\_\_\_\_
- Minerals to be separated, specify: \_\_\_\_\_
- Estimated age: \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

