

INDIANA STATE DEPARTMENT OF HEALTH
Chemistry Laboratories
 550 W. 16th Street, Suite B
 INDIANAPOLIS, INDIANA 46202-2203
CHEMICAL EXAMINATION OF SOLIDS

Do not write in this space

Lab No. _____

Date Rec. _____

Date Rep. _____

 Name

 Street

 City or Town IN ZIP

Please provide an email or a Fax number for your Report (PRINT):

 Email Address

 Fax Number

Organization Name _____

Contact Name _____

Contact Telephone _____

City or Town _____

Date Collected (mm/dd/yyyy) _____

Time Collected _____

Where was sample collected _____

LABORATORY ANALYSES

	<i>Request</i>	<i>Result</i>		<i>Request</i>	<i>Result</i>		<i>Request</i>	<i>Result</i>
INORGANICS			METALS			METALS		
Alkalinity as CaCO ₃			Arsenic			Lead		
Hardness as CaCO ₃			Barium					
			Cadmium			RCRA Metals		
pH			Chromium (Total)					
			Copper					
Chlorides as Cl			Mercury					
Sulfates as SO ₄			Selenium					
Phosphates as P			Silver					
						ORGANICS		
Fluorides as F			Iron			VOC		
Nitrate + Nitrite as N			Manganese			SVOC		
			Calcium			Pesticides		
			Magnesium			TPH - E		
			Sodium			TPH - V		
			Potassium			PCBs		
						Methamphetamine		

REMARKS:

Collected by (PRINT) _____

Collected by Signature _____