



INDOOR® Environmental Analysis Request Form

Company name: _____ Telephone: _____ P.O. #: _____

Fax: _____ Date Submitted: _____

Address: _____

Contact Person: _____ E-mail address: _____

Sample ID #	Date Sampled	Assay Requested (MARIA™, ELISA, Endotoxin)	Allergens Requested	Sample Type (dust, air filter, extract etc.) and Special Instructions

<p>For Laboratory Use Only</p> <p>Date Received: _____ Temperature: _____ Sample Number: _____ Initials: _____ Sample Condition: <input type="checkbox"/> Acceptable <input type="checkbox"/> Not Acceptable (see Comments)</p>	<p>Comments</p> <p>* A processing fee will be charged for dust samples that are processed by IBI, but contain not enough sample (NES) for analytical purposes. This includes all samples that contain less than 10 milligrams of dust.</p> <p style="text-align: center;"> <input type="checkbox"/> \$25 for ELISA <input type="checkbox"/> \$50 for Maria™ <input type="checkbox"/> \$40 for Maria™ Service Partners. </p>
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