



17645 Juniper Path, Suite 260
Lakeville, MN 55044

Misc. EPS Testing Request
ALL INFORMATION REQUIRED TO BE COMPLETED

Company Name: _____ Location: _____

Submitted by: _____ Send report to email(s): _____

Date: _____

ASTM C578 or ASTM D6817 Type: _____

Sample ID _____

Block Lot Number: _____

Date of Manufacture: _____

Resin Manufacturer/Grade: _____

Resin Lot Number: _____

Recycled Content: _____

Please conduct the following tests: (describe and provide ASTM Standard reference)

Test immediately or condition samples? (select one)

- Test Immediately
- Condition Samples as required by ASTM C578
- Condition Samples as required by ASTM D6817
- Other _____

ATZ Internal Use: Project ID _____