AGRI QUANTA
Laboratoire environnemental

74, rue Dansereau
St-Ours, Qc, J0G 1P0
T 450.785.2013
info@agriquanta.com
www.agriquanta.com

Request no.

ANALYSIS REQUEST FORM

SOIL

IDENTIFICATION

FROM (CCAE, Company, etc.)		**SAMPLE** (Farm, owner of the samples, etc.)	
Company Name		**Company Name**	
Contact		**Contact**	
Address		**Address**	
Postal code		**Postal code**	
Phone		**Phone**	
Email		**Email**	

☐ Send invoice to this person/company [1]   ☐ Send invoice to this person/company [1]

Send report to :   Organization name : _____   To the attention of : _____
Email : _____

1 : Check the appropriate boxes to indicate who must be charged for the analysis and recipient(s) of the analysis report.

SIGNATURE (customer or his representative)

ANALYSIS

SAMPLES AND ANALYSIS :
Identify each sample and check analysis required.

	For lab use only Lab number	Sample identification (10 digits max.)	Zone[3] (√)	Sample date (dd/mm/yyyy)	Sampler	Standard [2]	Organic soil (Standard + total N + C/N)	Soil pH and buffer pH	Quick pH (surcharge-Delay 48h)	Conductivity	Boron (extraction with hot water)	Molybdenium (extraction with hot water)	Total Nitrogen	Nitrates	Texture (Q-2, r.22)[4]	Texture (Bouyoucos)	d85[4]	Other (specify in Comments section)
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		

2 : Soil pH/buffer pH, P, K, Ca, Mg, Al, CEC, organic matter, Cu, Mn, Zn, Fe, B, S
3 : Soil zone management service
4 : Included sedimentation curve

COMMENTS

FOR LAB USE ONLY
Reception date : _____
Receiver : _____   Entered : _____ Date : _____ Initials : _____
☐ Postage due, no. : _____   Delivery : ☐ Courier   ☐ Customer or his representative
Rejected, specify :