

Job Number: W_____

Mail: PO Box 2103, Stn Main Sidney, BC V8L 3S6 Courier: 4-2062 W Henry Ave Sidney, BC V8L 5Y1 Phone: (250) 656-1334 info@mblabs.com www.mblabs.com

Customer Information / Mailing Address for Signed Report:

	se include mail addre	names of all individent of all			authorized to rece	ive results and
City:				Postal Code:		
Tel:	ēl: ()			Cell: ()		
Email	:					
*Pleas	Arrival E se include	Drinking Water Sar Date names of all individue ould like us to email	Arrival Tim			
<u>Sam</u>	ple Inf	iormation: ier: • Well •		Other:		
Soil:	□ Waste	Garden	Compo	st 🗆 Landsc	ape	
Ferti	lization:	: 🗆 Organic	Chemical			
Plant	t: □ Vege	etable 🛛 Shrub	s 🗆 Tree	es 🗆 Other:		
Sam	ple Con	tainer: 🗆 MB La	abs Bottle	Ziploc Ba	ig □ Other:	
Sam	ple Add	ress (Only if diffe	erent from a	bove):		
		cription: mple was taken i.		Гар)		
Date	Taken:	/ DD MM	_/ YY	_ Ti	me Taken:	
Test	s Requir	red:				
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GST TOT	 AL	 834 RT0001				
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