

## ANALYSIS REQUEST FORM

### A-Customer Information.

Name:	
CNIC:	
Contact:	
Address:	

### B-Sample Information.

<b>1. Sample Detail:</b>	
i) Sample Description:	v) Variety/Genotype:
ii) Sample Size:	vi) Crop Year:
iii) Sample Packing (Type):	vii) Seal Intact: (Yes/No)
iv) Physical Condition:	viii) No. of Samples:
<b>2. Sample Submission Category:</b>	
i) Departmental Researcher:	
ii) Institute Laboratory:	
iii) AARI, Discipline:	
iv) Sister Organization:	
v) Allied Discipline:	
vii) Personal Advisory	

### C-Test Required:

i) Analysis Detail:	
ii) Analysis Method / STM:	
iii) Test Duration / Time Taken:	

### D- For Laboratory Use only:

Sample ID:	Report Issue Date:
<b>1. Sample Received By:</b>	
Name:	Signature:
Designation:	Date:
<b>2. Report Detail:</b>	
Analysis Report No:	Date:
Receipt No:	Received By:(Signature)
Test Fee Paid:(if applicable) Rs.=	Name:
<b>3. Opinions / Interpretations / Remarks:</b>	

Note 1: In case sampling is performed by the Laboratory Sampling Method (Soil, Plant and Water Analysis Laboratory Manual (CARDIA Serv), Edition-2012) is used.  
 Note 2: In case sample(s) is/are provided by the customer, the responsibility about the integrity of sample(s) lies with the customer.  
 Note 3: The results are reported with a confidence level of 95%, i.e. (C= 2) and are pertaining to analyzed sample(s) only.