

Form LPR016 - Sample receipt

Authority Logo	Receipt No.
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Sample Receipt

Received from the Authority one sealed sample container holding

Sample taken by *(print name)*

on

Date:

Time:

Taken from

Address or location

Postcode

Ordnance Survey national grid reference or User code if no address

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I understand that it is the intention of the Authority to have one of the remaining sample part(s) sent for laboratory analysis.

I witnessed the sample being taken

No

Yes

I witnessed the sample being divided and the sealing and marking of the sample container

No

Yes

Sealing tag number

Signature of person receiving this form

Name *(print)*

Authorised agent *(if applicable)*

Date

Time