|  |  |  |  |  |  |  |  |  |  |  |
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|  | **ANALYSIS REQUEST FORM** |  |  |  |  |  |  |

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|  | **Center of Excellence in Desalination Technology** |  |  |  |  |  |
|  | King Abdulaziz University |  |  |  |  |  |  |  |  |  |
|  | P.O.Box : 80200 |  |  |  |  |  |  |  |  |  |
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|  | Fax: +966 2 6951619 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | **General Instructions:**  |  |  |  |  |  |  |  |  |  |
|  | 1 | Use separate request form for each sample submitted. |  |
|  | 2 | Sample quantity should be enough for analysis.  |  |
|  | 3 | For Waste/Sewage samples minimum 1 liter sample is required.  |  |
|  | 4 | Select the Tests & Contents from the list below. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | **GENERAL TESTS** |  | **IONS BY ION CHROMATOGRAPHY** |  | **TRACE ELEMENTS BY ICP-OES** |
|  | 1 | pH |   |  | 1 | Fluoride  |   |  | 1 | Aluminum |   |
|  | 2 | Conductivity |   |  | 2 | Chloride  |   |  | 2 | Antimony |   |
|  | 3 | TDS |   |  | 3 | Bromide |   |  | 3 | Arsenic |   |
|  | 4 | Turbidity |   |  | 4 | Nitrate |   |  | 4 | Barium |   |
|  | 5 | TOC |   |  | 5 | Phosphate |   |  | 5 | Beryllium |   |
|  | 6 | COD |   |  | 6 | Sulphate |   |  | 6 | Cadmium  |   |
|  | 7 | Ammonium |   |  | 7 | Nitrite |   |  | 7 | Chromium |   |
|  | 8 | Hardness |   |  | 8 | Lithium |   |  | 8 | Cobalt |   |
|  |  |  |   |  | 9 | Sodium |   |  | 9 | Copper |   |
|  |  |  |   |  | 10 | Potassium |   |  | 10 | Iron |   |
|  |  |  |   |  | 11 | Magnesium |   |  | 11 | Lead |   |
|  |  |  |   |  | 12 | Calcium |   |  | 12 | Manganese |   |
|  |   |   |   |  |   |   |   |  | 13 | Molybdenum |   |
|  |   |   |   |  |   |   |   |  | 14 | Nickel |   |
|  |   |   |   |  |   |   |   |  | 15 | Selenium |   |
|  |   |   |   |  |   |   |   |  | 16 | Silver |   |
|  |   |   |   |  |   |   |   |  | 17 | Strontium |   |
|  |   |   |   |  |   |   |   |  | 18 | Titanium |   |
|  |   |   |   |  |   |   |   |  | 19 | Vanadium |   |
|  |   |   |   |  |   |   |   |  | 20 | Zinc |   |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Sample Description/Type (Sea water/Well water/Brine/Sewage/Waste/Botelled or Drinking water):  |   |
|  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Project Name and Treatment in brief: |   |   |   |   |   |   |
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|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Sampling Date & Time: |   |   |   |   |   |  | **Customer Reference No.:** |   |
|  | Sample submitted by: |  |  |  |  |   |  |  |  |   |
|  | (Name & Address) |  |  |  |  |   |  |   |  |   |
|  |  |   |   |   |   |   |  |   |   |   |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Sample Receiving Date & Time: |   |   |   |   |  | **CEDT Reference No.:** |   |
|  |  Sample Received by: |  |  |  |  |   |  |  |  |   |
|  | (Name & Sign) |  |  |  |  |   |  |   |  |   |
|  |  |   |   |   |   |   |  |   |   |   |
|  |  |  |  |  |  |  |  |  |  |  |  |