



AST SAMPLE SUBMISSION FORM

REPORT DATA This will be on the reports **exactly** as it appears here.

CONTACT: _____

COMPANY: _____

ADDRESS: _____

CITY, ST, ZIP: _____

SAMPLE DESCRIPTION: _____

MAIL RESULTS TO: same as report data

INVOICE TO: same as results

TESTING

CIRCLE ONE: PTM AASHTO ASTM OTHER: _____

SODIUM SULFATE SOUNDNESS
 MAGNESIUM SULFATE

LOS ANGELES ABRASION

SPECIFIC GRVTY / ABSORPTION

GRADATION WASHED

PETROGRAPHIC ANALYSIS
 VISUAL

INSOLUBLE RESIDUE
 PTM 618 ASTM D 3042

INSOL. RESIDUE PETROGRAPHIC
 (quarterly SRL - along w/ PTM 618)

FLAT & ELONGATED PARTICLES
 5:1 3:1

CRUSHED FRAGMENTS

UNCOMP. VOID CONTENT

SAND EQUIVALENT

WET-DRY DURABILITY

CLAY LUMPS / FRIABLE

UNIT WEIGHT

CONSTANT HEAD PERM.

PARTICLE SIZE ANALYSIS
 HYDROMETER ANALYSIS

PROCTOR
 STANDARD MODIFIED

LIQUID / PLASTIC LIMITS

OTHER (s): _____

SEND MORE SHIPPING LABELS TO:

Call when done

Phone #: _____

Fax when done

Fax #: _____

E-mail when done

E - address: _____