

Sample Results Form

Date:

Name of company who sent sample:

Address of company:

Contact Information:

Date product was received:

Weight of Sample received:

Any MSDS sheets or description with sample:

If yes please attach a copy to this form.

Upon visual inspection of the product briefly describe:

Date sample is being tested:

Who is testing the sample?

Is sample going to be run through an advancing media filter or oil water separator:

Based upon visual inspection.

If yes, what occurred during and as a result of the process?

Based upon findings are either of these processes suggested for this waste stream:

Temperature product was run at:

Was there foaming of the product?

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If yes, please describe:

Were oils found to be present?
Floating, etc.

If yes, please describe the impact the oils appeared to have on the processing of the waste stream:

Was there an odor during the processing of the sample?

If yes please describe:

When testing is complete run a one gallon sample of water.
See Ray for instructions.

Measure oil level in the unit before and after testing.

When removing sample from the evaporator please document finding:
See attached sheet for samples of write-ups.

Based upon all of the above findings which of the evaporation units are recommended:

What accessories, if any are recommended:

When form is complete please initial and date: