 **Deicer / Salt Information For Testing** ITD 1018 (Rev. 11-12)

itd.idaho.gov

Ref No.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sample Of | | | Supply Request Number (ITD 2379) | | | | | Lab Number | | | | | |
| Liquid Deicer  Salt | | |  | | | | |  | | | through | |  |
| Yard Location | | District | Test Identification Number | | | | | Bill of Lading Number | | | | | |
|  | |  | /A405072-B-MT/ | | | | |  | | | | | |
| Product Name | | | | Product Manufacturer | | | | | Supplier | | | | |
|  | | | |  | | | | |  | | | | |
| Sample Description | | | | | | | Quantity Represented | | Point of Sampling | | | | |
|  | | | | | | | Tons | |  | | | | |
| Sampled By | | | | | | Phone Number | | | Date Sampled | | | | |
|  | | | | | |  | | |  | | | | |
| **Mag Sample** | Time Sampled | | | | Specific Gravity | | | | | Temperature | | | |
|  | a.m.  p.m. | | | |  | | | | |  | | | |
| Tests Requested/Remarks | | | | | | | | | | | | Date Lab Received | |
|  | | | | | | | | | | | |  | |
| Send Reports To (Resident Engineer's Name) | | | | | | | | | | | | Date Reports Sent | |
|  | | | | | | | | | | | |  | |
| Remarks / Miscellaneous Information | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |

Distribution: Original -  Testing Lab Copies -  Resident/Regional Engineer  Sampler  District Materials