

REPUBLIC OF VANUATU
CONSTRUCTION MATERIALS LABOATORY
LABORATORY TEST REQUEST: AGGREGATES

CLIENT: _____ **Job No.** _____ **Date Sampled** _____

Project: _____ **Requested By** _____ **Sampled By** _____

Loctation: _____ **Tests Required By** _____ **ALL TESTING TO AUSTRALIAN STANDARDS**

LAB No.	SAMPLE DETAILS	Sampling	Bulk Density	Particle Density, WA coarse	Particle Density, WA fine	Grading: unwashed 1141.11	Grading: washed 1141.12	Flaxiness Index	Average Least dimension	Wet/Dry Strength	Particle Shape	Los Angles Abrasion	Aggregate Crushing Value	moisture content	NOTES

TEST INSTRUCTIONS SPECIFY: GRADING AS WET OR DRY

Request for Services
 We agree to Authorise PWD CMT laboratory to perform the the test request.

Signed: _____ **Company** _____

Request received by _____
 Date _____

Form: FL-A10 soil Lab Test Request/V1/Aug 18