



**TIMBER PRODUCTS**  
We Deliver Confidence. ®

# CONFIRMATION SAMPLE ANALYSIS REQUEST FORM

SEND SAMPLES TO:  
Timber Products Inspection  
1641 Sigman Road  
Conyers, GA 30012

**Plant Name:** \_\_\_\_\_ **City, State:** \_\_\_\_\_

ATTACH SAMPLE BAG HERE

Sample Type:	CONFIRMATION						
Charge #:	_____	Pen Fail/Tot: ____ / ____					
Material Sampled:	_____						Species: _____
Preservative:	ACQ	MCA	CA-C	EL2	MCA-C	CCA	
	B2O3	DOT	Other _____				
Target Retention:	0.019	0.05	0.06	0.14	0.15	0.17	0.40
	0.42	0.60	Other _____				

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