



A Waters Company

# Stationary Source Audit Sample Order

Complete one form for each sampling event.

## Scheduled Sampling Event

Start: \_\_\_\_\_ End: \_\_\_\_\_

Tester Project ID: \_\_\_\_\_

- Complete the form in its entirety. Save a copy for your records.
- Send the completed form to Waters ERA:
  - attach to an email and send to info@eraqc.com
  - print a copy and fax to 303.421.0159
- Waters ERA will contact the regulatory agency to confirm sample details and return a quote with project costs.

For subscription orders: Please note which month(s) you would like delivery. Delivery will occur the first week of the month.

Jan     Feb     Mar     Apr  
 May     Jun     Jul     Aug  
 Sept     Oct     Nov     Dec

Please include a copy of a completed [TNI calculation tool](#) for each requested method with this form to help with approval of requested samples.

## Metals Standards Prices valid through December 31, 2020

	Cat. #	Product Name	EPA Method	Specify Analyte Concentrations	Concentration Range	Price*
<input type="checkbox"/>	1425	Metals on Filter Paper	29	Antimony _____ Chromium _____ Nickel _____ Arsenic _____ Cobalt _____ Selenium _____ Barium _____ Copper _____ Silver _____ Beryllium _____ Lead _____ Thallium _____ Cadmium _____ Manganese _____ Zinc _____	10-350 µg/filter	\$235*
<input type="checkbox"/>	1426	Metals in Impinger Solution	29	Antimony _____ Chromium _____ Nickel _____ Arsenic _____ Cobalt _____ Selenium _____ Barium _____ Copper _____ Silver _____ Beryllium _____ Lead _____ Thallium _____ Cadmium _____ Manganese _____ Zinc _____	0.10-30 µg/mL after dilution	\$235*
<input type="checkbox"/>	1427	Mercury on Filter Paper	29	Mercury _____	1.0-75 µg/filter	\$176*
<input type="checkbox"/>	1428	Mercury in Impinger Solution	29; 101A	Mercury _____	0.9-200 ng/mL after dilution	\$176*
<input type="checkbox"/>	1429	Lead on Filter Paper	12	Lead _____	20-350 µg/filter	\$176*
<input type="checkbox"/>	1430	Lead in Impinger Solution	12	Lead _____	0.2-120 µg/mL after dilution	\$176*

## Inorganic Standards Prices valid through December 31, 2020

	Cat. #	Product Name	EPA Method	Specify Analyte Concentrations	Concentration Range	Price*
<input type="checkbox"/>	1440	Hydrogen Halides	26; 26A	Hydrogen Chloride _____ Hydrogen Fluoride _____	5.0-500 mg/L after dilution	\$223*
<input type="checkbox"/>	1441	Flouride in Impinger Solution	13A; 13B	Fluoride _____	1-50 mg/dscm after dilution	\$176*
<input type="checkbox"/>	1442	Nitrogen Oxide in Impinger Solution	7	Oxides of Nitrogen _____	100-2000 mg/dscm after dilution	\$176*
<input type="checkbox"/>	1443	Sulfur Dioxide in Impinger Solution	6; 8	Sulfur Dioxide _____	50-2000 mg/dscm after dilution	\$176*
<input type="checkbox"/>	1444	Sulfuric Acid in Impinger Solution	8	Sulfuric Acid _____	5-150 mg/dscm after dilution	\$176*

\* The prices listed are for stock audit samples. If state regulatory agency requires a sample with a specific concentration that is not available with a stock sample, custom pricing will apply for the sample. Shipping charges and a \$10 handling fee will be added to each shipment. Waters ERA will ship your order via the best method to ensure delivery in time for sampling event.

### INTERNAL USE ONLY

Qty	Cat #	Description	Lot Information	-Dash #



A Waters Company

# Stationary Source Audit Sample Order

Complete this form in its entirety. Visit the [TNI website](#) to get or confirm your SSAS ID (Valid Value/TNI Code).

Order Placed By: \_\_\_\_\_

Company Name: \_\_\_\_\_

Select where the samples are to be shipped:

Tester  Facility

Notes: \_\_\_\_\_

In accordance with Section 5.1 of the General Requirements for Participation in the TNI SSAS program restricting subcontracting of the analysis of the audit sample, if you choose to send your samples to a laboratory different than that specified when the order is placed, Waters ERA will not be able to provide an evaluation of the results. Therefore, Waters ERA must be notified in writing of changes to tester, laboratory, or facility prior to the agreed ship date of the audit sample(s).

**By submitting this order, I authorize Waters ERA to release all reports, updates, and notifications pertaining to this project to the Facility, Tester, Laboratory, and Regulatory Agency listed below, as well as ERA's accrediting body and the TNI SSAS Expert Committee.**

### Tester Shipping Address

Tester SSAS ID:

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: (     )     -

Email: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

INTERNAL USE ONLY Tester SSAS Acct #: \_\_\_\_\_

### Facility Physical Address

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: (     )     -

Email: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

INTERNAL USE ONLY Facility SSAS Acct #: \_\_\_\_\_

### Laboratory Information

Lab SSAS ID:

Laboratory Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: (     )     -

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

INTERNAL USE ONLY Laboratory SSAS Acct #: \_\_\_\_\_

### Regulatory Agency

Regulator SSAS ID:

Regulatory Agency: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: (     )     -

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

INTERNAL USE ONLY Agency Acct #: \_\_\_\_\_

### Billing Address

Complete this section only if billing address differs from address above.

Tester  Facility

Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: (     )     -

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Payment Information/Terms

Reference or P.O. #: \_\_\_\_\_

Credit Card  Net 30\*  Prepay

\*Net 30 terms are subject to credit approval.

We are pleased to accept credit cards. To place your secure order, please call our Waters ERA Customer Service team at **800.372.0122** to provide your credit card information.

P.O. or CC subject to change. Call before billing. (For subscription orders only.)

Rev: 01/2020