



DSR23 

70-DS-R23 Rev 4

1801 Central Commerce Court, Bldg 2
 Round Rock, TX 78664
 (512) 263-0498 Fax (512) 263-7039
 Email: info@airtesting.com

Next Sample Due Approx:
 Last Report No.
 Last Sample Date

All **Highlighted** Blanks Must be Complete
 Need Help? Call (512) 263-0498

| Lab Use Only | Order Number | Kit Number | Report Number |
|--------------|--------------|------------|---------------|
|--------------|--------------|------------|---------------|

Contact Information

| | | | |
|-----------------|-------------------|--|--|
| Customer Number | Company Name | | |
| Contact | E-mail | | |
| Phone | Testing Frequency | | |

Account Information is pre-populated from last air test. Change above information if incorrect

System Information

| | |
|---|--|
| Type of Compressor/Make/Model | |
| Serial Number | |
| Date/Time Sample Collected | |
| Add'l Information for Report (Optional) | |

*Rush Analysis – Same Day Analysis - Additional Fee – By marking this box, I understand that I am authorizing Same Day Analysis & Reporting
 Please provide PO or credit card for additional fee (Normal Turnaround is one business day)*

Air Spec:

Oil Mist/Particulate Sample Data

| | | | | | | |
|-----------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Filter No | | | | | | |
| Orifice Size Used | <table border="1"> <tr> <td>Choose One</td> <td>0.078 <input type="radio"/></td> <td>0.115 <input type="radio"/></td> <td>0.200 <input type="radio"/></td> <td>0.375 <input type="radio"/></td> </tr> </table> | Choose One | 0.078 <input type="radio"/> | 0.115 <input type="radio"/> | 0.200 <input type="radio"/> | 0.375 <input type="radio"/> |
| Choose One | 0.078 <input type="radio"/> | 0.115 <input type="radio"/> | 0.200 <input type="radio"/> | 0.375 <input type="radio"/> | | |
| Pressure Reading from TRI's Gauge | <input type="text"/> | | | | | |
| Flow Time | Minutes <input type="text"/> | | | | | |

Use a Separate Filter for Each Source/Sample.
 Do not touch or contaminate filter pad or metal screen.
**See Special Extended Time Instructions
 (Use Filter Labeled Prewash Filter)**

Breathing Air Sample Gas Sample Data

| | |
|--------------------------------|--------------------------------|
| Sample Bottle No | <input type="text"/> |
| Flow Time with Bottle in Place | Minute(s) <input type="text"/> |

TRI's sample bottle must remain in place for a Minimum of one minute with the white float away from the **WHITE** sampling cap. **Replace Black Shipping Cap When Done**

Odor Sample Data

Pronounced Odor? **Choose One** Yes No

"Specific measurement of odor in gaseous air is impractical. Air normally may have a slight odor. The presence of a pronounced odor should render the air unsatisfactory."
 – From Section 5.6 of ANSI/CGA G-7.1-2011

By signing this data sheet, I declare that the sample submitted to TRI was taken according to the instructions provided and was not tampered with to falsify air test results.

Printed Name of Person Taking Test

Signature Date