

LABS

EVIO

TESTING + RESEARCH

HEMP + CBD

INDUSTRIAL HEMP

CALIFORNIA PRE-HARVEST ANYALYSIS REQUEST

REGISTERED GROWER NAME _____

REGISTERED BUSINESS NAME _____

CFDA REGISTRATION NUMBER _____

PHONE _____

EMAIL _____

GROW AREA TYPE (*Check one*) FLOWER FIBER SEED OTHER

OTHER (*Please Explain*) _____

GROW AREA TYPE (*Check one*) FIELD GREENHOUSE

TOTAL LOT SIZE (*Acres*) _____

HARVEST LOT LOCATION ADDRESS _____

HARVEST LOT GPS COORDINATES _____

(From approx. center the harvest lot or door of greenhouse, and in decimal format, eg: 45.123456; -123.456789)

CULTIVAR NAME _____

WRITTEN DESCRIPTION _____

Describe the location of the harvest lot to be sampled such that the growing area is apparent from a visual inspection of the premises and is easily discernible from other harvest lots

I certify that I am authorized to request pre-harvest sampling and testing for the above listed harvest lot(s) and the information provided is accurate. All samples will be tested according to the information provided on this document. Laboratory offers no guarantee of turnaround time. I understand the risks associated with this request.

SIGNATURE _____

NAME _____ DATE _____

Remit this form with your samples and payment to: EVIO Labs Berkeley 1200 5th St., Berkeley, CA 94710

For any additional questions or concerns, or to make a credit card payment by phone, please call us at 888-978-5066 or email berkeley@eviolabs.com. EVIO Labs will not process samples without payment.