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| SERVICE REQUEST FORM | | For IDQ use only SR No.: IDQ-2024SR-_____ |
| TEED–Thermal and Environmental Engineering Department Environmental Monitoring Services | | Obra No.: _____ Version:IDQ-Q-202401 |
| Client: | P.O. No.(If applicable): | |
| Address: | Tel: | |
| E-Mail: | Fax: | |
| Project name: | Contact person: | |
| Sampling Period: <input type="checkbox"/> Period I : 09:30-12:30 <input type="checkbox"/> Period II : 14:45-17:15 <input type="checkbox"/> Period III : 09:00-09:30 <input type="checkbox"/> Period IV : 12:30-13:00 <input type="checkbox"/> Period V : 14:30-14:45 <input type="checkbox"/> Period VI : Mon to Thu 17:15-17:45 <input type="checkbox"/> Period VII : Fri 17:15-17:30 | | |

| Price list item no. | Test items | Unit price | Quantity | Amount |
|---------------------|---|----------------------|----------|--------|
| 5.2 | Water Quality Monitoring Service | | | |
| 5.2.15 | Lead, Chromium, Nickel, Cadmium, Copper, Antimony, Iron, Arsenic, Mercury, Turbidity, Color, pH, Free Residual Chlorine, Conductivity at 20 °C, Heterotrophic Plate Count (Colony Count), Total Coliforms, E.Coli (Total 17 parameters, reference to DSPA -The instruction for choosing and installing water dispensers – Table 1 The water quality test parameters for tap water source) | \$4,000.00 | | |
| 5.2.16 | Color, Turbidity, Odor and taste, Visible Matters, pH, Total Hardness, Chloride, Cadmium, Lead, Hexavalent Chromium, Iron, Arsenic, Mercury, Total Coliforms, E.Coli (Total 15 parameters, reference to DSPA -The instruction for choosing and installing water dispensers – Table 2 The water quality test parameters after installation) | \$3,700.00 | | |
| 5.2.17 | Turbidity, pH, Lead, Total Coliforms, E.Coli (Total 5 parameters, reference to DSPA -The instruction for choosing and installing water dispensers – Table 3 The water quality test parameters for operating period) | \$1,200.00 | | |
| 5.2.18 | Water sampling fee (Period I/ II) | \$300.00 | | |
| 5.2.19 | Water sampling fee (Period III/ IV /V /VI/ VII) | \$450.00 | | |
| 5.2.20 | Minimum charge per report (applies when the total testing fee per report is below this minimum charge) | \$300.00 | | |
| 5.2.21 | Report expedited processing fee | 100% of basic charge | | |
| 5.2.22 | Attendance fee (applicable to the case which attended to the scene but the conditions are not available to test in item 5.2.18.) | \$300.00 | | |
| 5.2.23 | Attendance fee (applicable to the case which attended to the scene but the conditions are not available to test in item 5.2.19.) | \$450.00 | | |
| 5.5 | Non-office hour testing | | | |
| 5.5.1 | Mon-Thu 17:45-00:00. Fri 17:30-00:00 (Except holidays) | 50% of basic charge | | |
| 5.5.2 | Mon-Fri 00:00-09:00 (Except holidays) | 100% of basic charge | | |
| 5.5.3 | Mon-Fri 13:00-14:30 (Except holidays) | 50% of basic charge | | |
| 5.6 | Saturday, Sunday, public holiday or government holiday (09:00-18:00) | 50% of basic charge | | |
| 5.7 | Saturday, Sunday, public holiday or government holiday (18:00-00:00) | 100% of basic charge | | |
| 5.8 | Saturday, Sunday, public holiday or government holiday (00:00-09:00) | 150% of basic charge | | |
| 5.9 | Labor holiday additional charge | 200% of basic charge | | |
| For IDQ use only | | Discount : | % | |
| | | Total : | MOP | |

Remark : NOTE : ALL SERVICES ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE PRICE LIST AND REMARKS (5.2). THE TEST METHOD PLEASE REFER TO THE DETAILS OF ANALYSIS REQUEST FORM.

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| For IDQ use only | AD contact person: Contact person: | <input type="checkbox"/> Cannot provide the related service |
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**By signing this SRF, you are aware of and agree to comply with the conditions of service and corresponding remarks in the " IDQ Service Price List" and are bound by them.

| | | | |
|----------------------------|--------------|--------------|---------------|
| Client's acceptance: | Received by: | Approved by: | Confirmed by: |
| Signature & company stamp: | | | |
| Date: | Date: | Date: | Date: |



Analysis Request form

TEED–Thermal and Environmental Engineering Department
 Environmental Monitoring Services

For IDQ use only

SR No.: IDQ-2024SR-_____

Obra No.: _____

Version:IDQ-Q-202401

Remark :

****The Analysis Request form must be submitted together with the SRF. Please refer to the above table for the testing basis of test items.**

Client's acceptance:

Signature & company stamp:

Date:

Approved by:

Date: