| SERVICE REQUEST NO.: | |
|----------------------|--|
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SERVICE REQUEST FOR LEASE OF MOISTURE DENSITY GAUGE

| I. | CUSTOMER INFORMATION | | | | |
|------|--|------------------|----------------------------------|--|--|
| | Company Name Address PNRI Licensee No. Name of Applicant Designation Contact Number | : : : | | | |
| II. | DETAILS OF SER | VICE REQUES | ST | | |
| | Brand/Model Serial Number | | | | |
| | PERIOD O | F LEASE | AUTHORIZE | D PLACE OF USE | |
| | | | | | |
| | | | Payment (to | be filled by RPSS Staff) | |
| | | | Cost of Lea | se : | |
| | | | OR Numbe | r : | |
| III. | TERMS & CONDI | ΓIONS | Date | : | |
| | In addition to the terr shall also apply: | ns and condition | as detailed in the <i>CONTRA</i> | CT OF LEASE, the following | |
| | The Institute is implementing a <i>CASH PAYMENT POLICY</i>. The services being requestively will be provided only upon presentation of the <i>Official Receipt</i>. The Contract of Lease is only valid for 6 months. | | | | |
| | | ification Letter | | prity shall be submitted before | |
| | e read and agreed wi sions regarding special | | - | pon and other supplementary | |
| | Signature of Applicant | | Date | Received by | |