



CONTROLLED SUBSTANCE 222 FORM REQUEST

(Schedule II Drugs Only)

Thank you for your interest in Particle Technology Labs. In order to schedule an analysis of a DEA Controlled Substance, we will need the following information:

CONTACT NAME: _____

COMPANY: _____

PHONE: _____

FAX: _____

EMAIL: _____

DATE SAMPLES
WILL SHIP: _____

MATERIAL TYPE: _____

NUMBER OF
CONTAINERS: _____

AMOUNT (IN GRAMS)
PER CONTAINER: _____

NAME AND
ADDRESS TO
APPEAR ON
222 FORM: _____

ATTN: _____

Please fax or email this form along with a copy of your DEA License to:

Fax: 630-969-2745

Email: experts@particletechlabs.com