



ASTM D 3039 - Tensile Properties of Polymer Matrix Composite Materials

Client: _____

Inspector's Name: _____

Inspector's License: _____

Project Name: _____

Project Address: _____

Permit Number: _____

Contractor: _____

Date Sampled: _____

Location Sampled: _____

Material Manufacturer: _____

Material Type: _____

Fabric Lot No. / Fabric Roll No.: _____

Epoxy Lot No.: _____

Fiber Direction: _____

No. of Plys: _____

Additional Information/Requests: _____

FOR LAB USE ONLY

Date Specimen Received: _____

Specimen ID: PFRP- _____