



LAB ORDER #: _____

PAGE _____ OF _____

SAMPLE CHAIN OF CUSTODY

PROJECT # / PROJECT NAME _____

P.O. # _____

CLIENT: _____

REPORT TO: _____

ANALYSES REQUESTED

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BILLING ADDRESS: _____

PHONE #: _____ FAX PHONE: _____ SAMPLER (PRINT & SIGN NAME): _____

TURN-AROUND TIME
 STANDARD
 RUSH

DUE DATE: _____

CALTEST #	DATE SAMPLED	TIME SAMPLED	MATRIX	CONTAINER AMOUNT/TYPE	PRESERVATIVE	SAMPLE IDENTIFICATION SITE	CLIENT LAB #	COMP. or GRAB	REMARKS

By submittal of sample(s), client agrees to abide by the Terms and Conditions set forth on the reverse of this document.

RELINQUISHED BY	DATE/TIME	RECEIVED BY	RELINQUISHED BY	DATE/TIME	RECEIVED BY

Samples: WC _____ MICRO _____ BIO _____ AA _____ SV _____ VOA _____ TEMP: _____ SEALED: Y ___ / N ___ INTACT: Y ___ / N ___

BD: BIO _____ WC _____ AA _____

CC: AA _____ SV _____ VOA _____

SIL: HP _____ PT _____ QT _____ VOA _____

W/HNO₃ _____ H₂SO₄ _____ NaOH _____

PIL: HNO₃ _____ H₂SO₄ _____ NaOH _____ HCL _____

COMMENTS

MATRIX: AQ = Aqueous Nondrinking Water, Digested Metals; FE = Low R.L.s, Aqueous Nondrinking Water, Digested Metals; DW = Drinking Water; SL = Soil, Sludge, Solid; FP = Free Product

CONTAINER TYPES: AL = Amber Liter; AHL = 500 ml Amber; PT = Pint (Plastic); QT=Quart (Plastic); HG = Half Gallon (Plastic); SJ = Soil Jar; B4 = 4 oz. BACT; BT = Brass Tube; VOA = 40 mL.VOA; OTC = Other Type Container

R _____ PR _____ M _____ F _____

FOR LAB USE ONLY

REV. 11/03
 PINK - CLIENT COPY AS RECEIPT
 YELLOW - CLIENT COPY TO ACCOMPANY FINAL REPORT
 WHITE - LABORATORY