



# SHIPPING DOCUMENTS

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN

# Garden State Laboratories, Inc.

Main Lab - 410 Hillside Avenue, Hillside NJ 07205 - NJDEP Lab Cert. #20044  
Jersey Shore Lab - 54 Main Street, Waretown NJ 08758 - NJDEP Lab Cert. #15037

Tel. 800-273-8901/908-688-8900 Fax 908-688-8966 www.gslabs.com info@gslabs.com

## Office and Drop off Locations

North Jersey Office: 225 Sparta Avenue, Sparta, NJ 07871 Tel. 973-729-1827

West Jersey Office: 2050 Route 31 North, Glen Gardner, NJ 08826 Tel. 908-537-7414

## CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Garden State Laboratories, Inc. Contact/Authorized by: Robert Szot  
Mailing Address: 410 Hillside Ave. Phone: 908-688-8900 EXT 129  
City/State/Zip: Hillside, NJ. 07205 Email: rszot@gslabs.com

## SAMPLE INFORMATION

SAMPLE TYPE: WASTE WATER *Pinelands Park*  
SAMPLE LOCATION: ACQUA ~~OW~~ LANDFILL LEACHATE TANKS

P4528

OR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

Page \_\_\_\_\_ of \_\_\_\_\_

GSL CLIENT #

MICRO #

CHEM. #

SAMPLE REC'D BY:

☒ GSL FIELD SAMPLER/PICK-UP

☐ PICK-UP AT DROP OFF LOCATION

☐ DELIVERED BY CLIENT

Grab/Comp	SAMPLE ID	SAMPLE COLLECTION				ANALYSIS REQUIRED (Print Legibly)		CONTAINER INFORMATION			
		Date	Time	AM	PM	<input type="checkbox"/> List attached	Total Pages	No.	Type*	Size	Pres.*
✓	241023068-02 VOA	10/23/24	8:40	X		EPA 8260 TCL LIST + Acrolien & Acrylonitrile	3	V	V	40ml	A
X	241023062-05 Trip blank	10/23/24				EPA 8260 TCL LIST + Acrolien & Aci	2	V	V	40ml	A

Container Type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify:  
Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid  
E = Hydrochloric Acid F = Zinc Acetate G = Sodium Thiosulfate H = Ascorbic Acid I = Cooled Other/Specify:

☒ SUBCONTRACTED WORK

TURNAROUND TIME: ☒ Stand ☐ Rush (IF RUSH REQUESTED) Rush Due by:

REPORT FORM: ☒ Standard Report ☐ Other/Specify:

Standard Report + E2 PWS ID#:

SEND TO: Chem Tech

DATE/TIME: 10-24-24 - 9:52 AM

METHOD OF SHIPMENT Deliver

## PAYMENT INFORMATION

☐ Sampling/Pick-up Fee: \$ ☐ Composite Fee: \$ ☐ Rush Fee: \$ Amount Due: \$

Payment Method: ☐ Credit Card Type: ☐ Check # ☐ Other: See Quote

Note:

VOA UNPRESERVED DUE TO EFFERVESCENCE - 3 DAY TAT PER JORDAN HE

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION  
PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT):	Signature:	Date/Time:
Client/Client's Representative (PRINT):	Signature:	Date/Time:
1. Received/Relinquished by (PRINT): Daniel Asken	Signature: Daniel Asken	Date/Time: 10/23/24 15:58
2. Received/Relinquished by (PRINT): C. Pena	Signature: C. Pena	Date/Time: 10-24-24 9:52 AM

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.  
Main Lab certified by NJ Dept. of Health, NJDEP-TNI, NY Dept. of Health #11550 and PADEP #68-03680

10-24-24 9:52

2.6°C



284 Sheffield Street, Mountainside NJ 07092 (908)-789-8900 Fax : 908 789 8922

### Laboratory Certification

Certified By	License No.
CAS EPA CLP Contract	68HERH20D0011
Connecticut	PH-0830
DOD ELAP (L-A-B)	L2219
Maine	2024021
Maryland	296
New Hampshire	255423
New Jersey	20012
New York	11376
Pennsylvania	68-00548
Soil Permit	525-24-234-08441
Texas	T104704488



284 Sheffield Street, Mountainside, New Jersey 07092, Phone : 908 789 8900,  
Fax : 908 789 8922

## LOGIN REPORT/SAMPLE TRANSFER

Order ID : P4528      GARD04      Order Date : 10/24/2024 10:00:00 AM      Project Mgr :  
Client Name : Garden State Laboratories, I      Project Name : Waste Water 2024      Report Type : Level 1  
Client Contact : Sharon Ercoliani      Receive DateTime : 10/24/2024 9:52:00 AM      EDD Type : EXCEL NOCLEANUP  
Invoice Name : Garden State Laboratories, I      Purchase Order :      Hard Copy Date :  
Invoice Contact : Sharon Ercoliani      Date Signoff :

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
P4528-01	241023068-02-VOA	Water	10/24/2024	08:40 22	VOCMS Group1		624.1		10 Bus. Days
					VOCMS Group2		8260-Low		10 Bus. Days
P4528-02	241023062-05-TRIP-BLANK	Water	10/24/2024	08:40 12:00	VOCMS Group1		624.1		10 Bus. Days
					VOCMS Group2		8260-Low		10 Bus. Days

yg 10/29/24

Relinquished By :

Date / Time : 10-24-24 12:30

Received By :

Date / Time :

Storage Area : VOA Refridgerator Room