



SHIPPING DOCUMENTS

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Kleinfelder
ADDRESS: 25 Gold Drive
CITY: Hamilton STATE: NJ ZIP: 08691
ATTENTION: Mark Warchol
PHONE: 609-584-5271 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Harrington School
PROJECT NO. 24005166.001A LOCATION: Philadelphia, PA
PROJECT MANAGER: Mark Warchol
e-mail: mwarchol@kleinfelder.com
PHONE: 484-883-3892 FAX:

CLIENT BILLING INFORMATION

BILL TO: PO#: Same
ADDRESS: Same
CITY: STATE: ZIP:
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) 5 DAYS*
HARDCOPY (DATA PACKAGE) 5 DAYS*
EDD: 5 DAYS*

*TO BE APPROVED BY CHEMTECH

STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS DAYS

DATA DELIVERABLE INFORMATION

☐ Level 1 (Results Only) ☐ Level 4 (QC + Full Raw Data)
☒ Level 2 (Results + QC) ☐ NJ Reduced ☐ US EPA CLP
☐ Level 3 (Results + QC) ☐ NYS ASP A ☐ NYS ASP B
+ Raw Data ☐ Other _____
☐ EDD FORMAT _____PAVED Clean Fill
Parameters

1 2 3 4 5 6 7 8 9

PRESERVATIVES

COMMENTS

CHEMTECH SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS	
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER	
1.	COMP-1	Soil	✓		10/31/24	11:05	4	✓										
2.	COMP-2					11:10	3											
3.	COMP-3					11:15	4											
4.	COMP-4					11:20												
5.	COMP-5					11:25												
6.	COMP-6					11:30	✓											
7.	SB-1			✓		8:45	1											
8.	SB-2					8:55												
9.	SB-3					9:05												
10.	SB-4					9:10												

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP	5.7 °C
1. [Signature]	10/31/24 14:00	1. [Signature]	Comments: Put grab samples on hold, do not analyze until further notice	
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:		
2. [Signature]	11-1-24	2. [Signature]		
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:		
3. [Signature]		3. [Signature]		
Page 1 of 2			CLIENT: ☐ Hand Delivered ☒ Other FedEx	Shipment Complete
			CHEMTECH: ☐ Picked Up ☐ Field Sampling	☐ YES ☐ NO

CHEMTECH

CHAIN OF CUSTODY RECORD

284 Sheffield Street, Mountainside, NJ 07092
(908) 789-8900 • Fax (908) 789-8922
www.chemtech.net

CHEMTECH PROJECT NO.

QUOTE NO.

COC Number

P4675

2042210

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Kleinfelder
ADDRESS: 2 S Gold Drive
CITY: Hamilton STATE: NJ ZIP: 08691
ATTENTION: Mark Warchol
PHONE: 609-584-5271 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Harrington School
PROJECT NO.: 24005166.001A LOCATION: Philadelphia, PA
PROJECT MANAGER: Mark Warchol
e-mail: mwarchol@kleinfelder.com
PHONE: 484-893-3892 FAX:

CLIENT BILLING INFORMATION

BILL TO: _____ PO#: _____
ADDRESS: Same
CITY: _____ STATE: _____ ZIP: _____
ATTENTION: _____ PHONE: _____

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☒ Level 2 (Results + QC) ☐ NJ Reduced ☐ US EPA CLP
☐ Level 3 (Results + QC) ☐ NYS ASP A ☐ NYS ASP B
+ Raw Data ☐ Other _____
☐ EDD FORMAT _____

1	2	3	4	5	6	7	8	9

CHEMTECH SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS	
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER	
1.	SB-5	Soil		✓	10/31/24	9:20	1	✓										
2.	SB-6					9:30												
3.	SB-7					10:15												
4.	SB-8					10:20												
5.	SB-9					10:30												
6.	SB-10					10:40												
7.	SB-11					10:50												
8.	SB-12					10:55												
9.																		
10.																		

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER: 1. <u>[Signature]</u>	DATE/TIME: <u>10/31/24 14:00</u>	RECEIVED BY: 1. _____	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP. <u>5.7°C</u>
RELINQUISHED BY SAMPLER: 2. _____	DATE/TIME: <u>11-1-24</u>	RECEIVED BY: 2. _____	Comments: <u>Put grab samples on hold, do not analyze until further notice</u>
RELINQUISHED BY SAMPLER: 3. _____	DATE/TIME: _____	RECEIVED BY: 3. _____	Page <u>2</u> of <u>2</u>

CLIENT: ☐ Hand Delivered ☒ Other <u>FedEx</u>	Shipment Complete ☐ YES ☐ NO
CHEMTECH: ☐ Picked Up ☐ Field Sampling	



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 (ANAB)	L2219
Maine	2024021
Maryland	296
New Hampshire	255424 Rev 1
New Jersey	20012
New York	11376
Pennsylvania	68-00548
Soil Permit	525-24-234-08441
Texas	T104704488

LOGIN REPORT/SAMPLE TRANSFER

Order ID : P4675 POWE02

Order Date : 11/1/2024 11:22:00 AM

Project Mgr :

Client Name : Kleinfelder

Project Name : ~~Edison School~~ Harrington School

Report Type : Results+QC

Client Contact : Mark Warchol

Receive DateTime : 11/1/2024 11:05:00 AM

EDD Type : EXCEL NOCLEANUP

Invoice Name : Kleinfelder

Purchase Order :

Hard Copy Date :

Invoice Contact : Mark Warchol

Date Signoff :

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
P4675-01	COMP-1	Solid	10/31/2024	11:05					
					VOCMS Group1		8260D	3 Bus. Days	5 Days
P4675-02	COMP-2	Solid	10/31/2024	11:10					
					VOCMS Group1		8260D	3 Bus. Days	5 Days
P4675-03	COMP-3	Solid	10/31/2024	11:15					
					VOCMS Group1		8260D	3 Bus. Days	5 Days
P4675-04	COMP-4	Solid	10/31/2024	11:20					
					VOCMS Group1		8260D	3 Bus. Days	5 Days
P4675-05	COMP-5	Solid	10/31/2024	11:25					
					VOCMS Group1		8260D	3 Bus. Days	5 Days
P4675-06	COMP-6	Solid	10/31/2024	11:30					
					VOCMS Group1		8260D	3 Bus. Days	5 Days



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

LOGIN REPORT/SAMPLE TRANSFER

Order ID : P4675	POWE02	Order Date : 11/1/2024 11:22:00 AM	Project Mgr :
Client Name : Kleinfelder		Project Name : Edison School Harrington School.	Report Type : Results+QC
Client Contact : Mark Warchol		Receive DateTime : 11/1/2024 11:05:00 AM	EDD Type : EXCEL NOCLEANUP
Invoice Name : Kleinfelder		Purchase Order :	Hard Copy Date :
Invoice Contact : Mark Warchol			Date Signoff :

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
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Relinquished By : 

Date / Time : 11-1-24 1200

Received By : 

Date / Time : 11/01/24 1200

Storage Area : VOA Refridgerator Room