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ALLIANCE PROJECT NO.

QUOTE NO.

COC Number

P4768
2046207

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING INFORMATION

REPORT TO BE SENT TO:

COMPANY: **TPCL Engineering**
ADDRESS: **2 Clemco Ln, Bldg 2**
CITY: **Hillsborough** STATE: **NJ** ZIP: **08844**
ATTENTION: **Paul Rotondi**
PHONE: **609-203-3846** FAX: **N/A**

PROJECT NAME: **Trenton Youth Weekly**
PROJECT NO.: LOCATION: **Trenton**
PROJECT MANAGER: **PAUL Rotondi**
e-mail: **PROtondi@TPCLEngineering.com**
PHONE: **609-203-3846** FAX: **com**

BILL TO: **See Client** PO#:
ADDRESS:
CITY: STATE: ZIP:
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

DATA DELIVERABLE INFORMATION

FAX (RUSH) DAYS*
HARDCOPY (DATA PACKAGE): DAYS*
EDD: DAYS*
*TO BE APPROVED BY CHEMTECH
STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

☒ 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

VOC + 10
EPA
Mnems
PCBs
SVOCs

1 2 3 4 5 6 7 8 9

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										COMMENTS ← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	B-3 #1	Soil		X	11/7	9:49	4	3	1	1	1	1					
2.	B-3 #2			X	11/7	9:54	5	3	3	3	3	3					
3.	B-3 #3			X	11/7	10:01	6	3	3	3	3	3					
4.	B-4			X	11/7	9:07	5	3	2	2	2	2					
5.	B-5			X	11/7	9:26	5	3	2	2	2	2					
6.	B-6 #2			X	11/7	10:33	5	3	2	2	2	2					
7.	B-6 #3			X	11/7	10:36	5	3	2	2	2	2					
8.																	
9.																	
10.																	

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

RELINQUISHED BY SAMPLER: 1. NA	DATE/TIME: 11-7-24 1340	RECEIVED BY: 1. CR	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 1.9.5 °C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	Comments: NORMAL TAT
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	Comments: If. Cur #1
Page ____ of			CLIENT: ☒ Hand Delivered ☐ Other
			Shipment Complete ☐ YES ☐ NO