

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: ARMORE INC
ADDRESS: 29 RIVERSIDE AVE BLDG 4
CITY Newark STATE: NJ ZIP: 07104
ATTENTION: Michael Sharphouse
PHONE: 973 481 2406 FAX: 973 481-2637

CLIENT PROJECT INFORMATION

PROJECT NAME:
PROJECT NO.: LOCATION:
PROJECT MANAGER:
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

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

ANALYSIS

DATA TURNAROUND INFORMATION

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

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

1. VOA
2. CN
3. SVOA
4. BOD/TSS
5. METALS
6.
7.
8.
9.

PRESERVATIVES

COMMENTS

Specify Preservatives
A-HCl D-NaOH
B-HNO3 E-ICE
C-H2SO4 F-OTHER

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	EFF WASTE WATER	WW		X	12/6/27	7:15		X	X								
2.	EFF WASTE WATER	WW	X		12/6/27	6:45				X	X	X					
3.																	
4.																	
5.																	
6.																	
7.																	
8.																	
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>12/6/27 1425</u>	RECEIVED BY: 1. <u>[Signature]</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2-30.5</u> °C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME: <u>12-6-27 1425</u>	RECEIVED BY: 2. <u>[Signature]</u>	Comments: <u>Zinc Lead Metals</u>
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	Comments: <u>Fluoride</u>

Page ____ of ____ CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO