

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: Spectra East inc
ADDRESS: 8 King Road
CITY: Rockleigh STATE: NJ ZIP: 07647
ATTENTION: Jacob Valeich
PHONE: 201-767-7070 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: outfall 001-Orangetown
PROJECT NO.: D.S permit 2025 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. Oil & Grease + Mynal
2. Phenolics
3. SVOC
4. PCB
5. Pesticides
6. NH4-Nate
7. BOD5
8. TSS
9. VOC →

PRESERVATIVES

COMMENTS

ALLIANCE 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	
1.	Manhole	W	✓		2-6-25	1055	19	✓	✓	✓	✓	✓	✓	✓	✓	✓	
2.																	PH 8.22
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:	DATE/TIME: <u>1150</u>	RECEIVED BY: <u>[Signature]</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>3.16</u> °C
1. <u>[Signature]</u>	DATE/TIME: <u>2-6-25</u>	1. <u>[Signature]</u>	Comments:
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
2. <u>[Signature]</u>		2. <u>[Signature]</u>	
RELINQUISHED BY SAMPLER:	DATE/TIME: <u>1830</u>	RECEIVED BY:	
3. <u>[Signature]</u>	DATE/TIME: <u>2-6-25</u>	3. <u>[Signature]</u>	

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ADDRESS: 8 King Road

CITY: Rockleigh STATE: NJ ZIP: 07647

ATTENTION: Jacob Valeich

PHONE: 201-767-7070 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Outfall 001-0mngz+bwn Dis permit 2025

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

Metals
Cyanide
Cyanide-Ammonia
COD
Ammonia
LL Hg

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										COMMENTS
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	Manhole	W	✓		2-6-25	1055	19	✓	✓	✓	✓	✓	✓	✓			
2.																	
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:	DATE/TIME: 1150	RECEIVED BY:	1150	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP	3.1 °C
1.	2-6-25	1.	26-25	Comments:	
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:			
2.		2.			
RELINQUISHED BY SAMPLER:	DATE/TIME: 1830	RECEIVED BY:			
3.	2-6-25	3.			

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CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO