

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING INFORMATION

REPORT TO BE SENT TO:

COMPANY: **Aramark uniforms**
ADDRESS: **740 Frelinghuysen Ave.**
CITY: **Newark** STATE: **NJ** ZIP: **07114**
ATTENTION: **Jarrod Mills**
PHONE: **973-824-1101** FAX:

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

BILL TO: 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

TPH
BOD5
TSS

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										← 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.	Grab Comp	W	✓	✓	3-12-25	1239	1	✓	✓	✓							
2.		W	✓	✓	3-12-25	1242	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: 1244	RECEIVED BY:	DATE/TIME: 1244	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 3.1 °C
1.	3-12-25	1.	3-12-25	Comments:
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:		
2.		2.		
RELINQUISHED BY SAMPLER:	DATE/TIME: 1819	RECEIVED BY:		
3.	3-12-25	3.		

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CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete
☐ YES ☐ NO