

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: **HOLLAND MFG Co**

ADDRESS: **15 MAIN ST**

CITY **SUCCASUNNA** STATE: ZIP:

ATTENTION:

PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: **AMC PRETREATMENT**

PROJECT NO.: LOCATION:

PROJECT MANAGER: **TODD HOLLAND**

e-mail:

PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: **SAME** PO#:

ADDRESS:

CITY STATE: ZIP:

ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) **5** 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

BOB5 TSS DTG PD4 TOTAL P NH2

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.	EFFLUENT	W		✓	3/13	11:30	5	X	X	X	X	X	X				
2.	AERATION #1	W		✓	3/13	11:30	1		X								
3.	INFLUENT	W		✓	3/13	11:30	3	X					X				
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. E MARTINEZ	DATE/TIME: 3/13 1:30	RECEIVED BY: 1. _____	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 3.1-5 °C
RELINQUISHED BY SAMPLER: 2. AB 191	DATE/TIME: 3-13-25 17:37	RECEIVED BY: 2. CP	Comments: LAB TO FILTER IR Count # 1
RELINQUISHED BY SAMPLER: 3. _____	DATE/TIME:	RECEIVED BY: 3. _____	Page ____ of CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO