



284 Sheffield Street, Mountainside, NJ 07092
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 www.chemtech.net

Alliance Project Number: 01627

CHAIN OF CUSTODY RECORD

COC Number:

CLIENT INFORMATION	PROJECT INFORMATION	BILLING INFORMATION
COMPANY: Scalamandre Tully JV	PROJECT NAME: DOT Harper Street Yard	BILL TO: Same PO#
ADDRESS: 57 Seaview Blvd	PROJECT #: 23657 LOCATION:	ADDRESS:
CITY: Pt Washington STATE: NY ZIP: 11050	PROJECT MANAGER:	CITY: STATE: ZIP:
ATTENTION: Dean Devoe	E-MAIL:	ATTENTION: PHONE:
PHONE: 718 446 7000 FAX:	PHONE: FAX:	

DATA TURNAROUND INFORMATION	DATA DELIVERABLE INFORMATION	ANALYSIS	PRESERVATIVES	COMMENTS																						
FAX: _____ ASAP _____ DAYS* HARD COPY: _____ DAYS* EDD _____ DAYS* * TO BE APPROVED BY ALLIANCE STANDARD TURNAROUND TIME IS 10 BUSINESS DAYS	<input type="checkbox"/> RESULTS ONLY <input type="checkbox"/> RESULTS + QC <input type="checkbox"/> New Jersey REDUCED <input type="checkbox"/> New Jersey CLP <input type="checkbox"/> EDD Format _____	<input type="checkbox"/> USEPA CLP <input type="checkbox"/> New York State ASP "B" <input type="checkbox"/> New York State ASP "A" <input type="checkbox"/> Other _____	<table border="1"> <tr> <th>Full TCLP</th> <th>RIC</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> <th>7</th> <th>8</th> <th>9</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Full TCLP	RIC	1	2	3	4	5	6	7	8	9												<-- Specify Preservatives A-HCl B-HNO3 C-H2SO4 D-NaOH E-ICE F-Other
Full TCLP	RIC	1	2	3	4	5	6	7	8	9																

CHEMTECH 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.	Grid Line 1/2 North	Soil		X	3/20/25	1230		X	X											
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 1. D Devoe	DATE/TIME March 20, 2025	RECEIVED BY 1. _____	Conditions of bottles or coolers at receipt: <input type="checkbox"/> Compliant <input type="checkbox"/> Non Compliant <input type="checkbox"/> Cooler Temp <u>4.8°C</u> MeOH extraction requires an additional 4oz. Jar for percent solid Comments: <input type="checkbox"/> Ice in Cooler? <u>yes</u> <u>IR-Gun # 1</u>
RELINQUISHED BY 2. _____	DATE/TIME 3-21-25	RECEIVED BY 2. <u>CR</u>	
RELINQUISHED BY 3. _____	DATE/TIME	RECEIVED FOR LAB BY 3. _____	

SHIPPED VIA: CLIENT: Hand Delivered Overnight
 ALLIANCE: Picked Up Overnight
Shipment Complete
 YES NO