



284 Sheffield Street, Mountainside, NJ 07092

(908) 789-8900 Fax: (908) 788-9222

www.chemtech.net

## CHAIN OF CUSTODY RECORD

Alliance Project Number:

01673

COC Number:

| CLIENT INFORMATION   |                                  | PROJECT INFORMATION  |                |                     |                      | BILLING INFORMATION   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
|--|----------------------------------|--|----------------|---------------------|----------------------|---|--------------|---------------|---|---|-------------|---|--|---|---|---|---|----------------------|--|--|--|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---|---|---|
| COMPANY: APTIM   |                                  | PROJECT NAME: Wheeler River Selenium   |                |                     |                      | BILL TO: Paul Hatzinger   |              |               |   |   | PO#         |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| ADDRESS: 17 Princess Road  |                                  | PROJECT #: 502347 LOCATION: aptim  |                |                     |                      | ADDRESS:  |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| CITY: Lawrenceville STATE: NJ ZIP: 08648   |                                  | PROJECT MANAGER: Paul Hatzinger  |                |                     |                      | CITY:   |              |               |   |   | STATE: ZIP: |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| ATTENTION: Rachael Rezes   |                                  | E-MAIL: paul.hatzinger@aptim.com   |                |                     |                      | ATTENTION:  |              |               |   |   | PHONE:      |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| PHO: 609-895-5364 FAX:   |                                  | PHONE: 609-895-5356 FAX:   |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| DATA TURNAROUND INFORMATION  |                                  | DATA DELIVERABLE INFORMATION   |                |                     |                      | ANALYSIS  |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| FAX: 2 DAYS*   |                                  | <input type="checkbox"/> RESEULTS ONLY <input type="checkbox"/> USEPA CLP                        |                |                     |                      | <div>Se-EPA 200.7</div> <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td></tr></table> |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|  |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 1  | 2                                | 3  | 4              | 5                   | 6                    | 7   | 8            | 9             |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| HARD COPY: 2 DAYS*   |                                  | <input checked="" type="checkbox"/> RESULTS + QC <input type="checkbox"/> New York State ASP "B" |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| EDD  |                                  | <input type="checkbox"/> New Jersey REDUCED <input type="checkbox"/> New York State ASP "A"      |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| * TO BE APPROVED BY ALLIANCE   |                                  | <input type="checkbox"/> New Jersey CLP <input type="checkbox"/> Other                           |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| STANDARD TURNAROUND TIME IS 10 BUSINESS DAYS   |                                  | <input type="checkbox"/> EDD Format  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| CHEMTECH<br>SAMPLE<br>ID   | PROJECT<br>SAMPLE IDENTIFICATION | SAMPLE<br>MATRIX   | SAMPLE<br>TYPE |                     | SAMPLE<br>COLLECTION |   | # of Bottles | PRESERVATIVES |   |   |             |   |  |   |   |   |   | COMMENTS             |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
|  |                                  |  | COMP           | GRAB                | DATE                 | TIME  |              | B             | 1 | 2 | 3           | 4 | 5  | 6 | 7 | 8 | 9 |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 1.   | GW Control                       | GW   |                | X                   | 3/27/25              | 14:30   | 1            | X             |   |   |             |   |  |   |   |   |   | Field Filtered 0.2µm |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 2.   | SDC9                             | GW   |                | X                   | 3/27/25              | 15:00   | 1            | X             |   |   |             |   |  |   |   |   |   | Field Filtered 0.2µm |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 3.   | FBR4                             | GW   |                | X                   | 3/27/25              | 15:30   | 1            | X             |   |   |             |   |  |   |   |   |   | Field Filtered 0.2µm |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 4.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 5.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 6.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 7.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 8.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 9.   |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 10.  |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE PROSESSION INCLUDING COURIER DELIVERY |                                  |  |                |                     |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| RELINQUISHED BY SAMPLER  |                                  | DATE/TIME  |                | RECEIVED BY         |                      | Conditions of bottles or coolers at receipt: <input type="checkbox"/> Compliant <input type="checkbox"/> Non Compliant <input type="checkbox"/> Cooler Temp 3.1°C   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 1. Rachael Rezes   |                                  | 3/27/25 16:15  |                | 1.                  |                      | MeOH extraction requires an additional 4oz. Jar for percent solid <input type="checkbox"/> Ice in Cooler? y   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| RELINQUISHED BY  |                                  | DATE/TIME  |                | RECEIVED BY         |                      | Comments:   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 2. UPS   |                                  | 3-28-25 07:00  |                | 2.                  |                      |   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| RELINQUISHED BY  |                                  | DATE/TIME  |                | RECEIVED FOR LAB BY |                      | SHIPPED VIA: CLIENT: <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Overnight   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
| 3.   |                                  |  |                | 3.                  |                      | ALLIANCE: <input type="checkbox"/> Picked Up <input type="checkbox"/> Overnight   |              |               |   |   |             |   |  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
|  |                                  |  |                |                     |                      |   |              |               |   |   |             |   | Shipment Complete  |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |
|  |                                  |  |                |                     |                      |   |              |               |   |   |             |   | <input type="checkbox"/> YES <input type="checkbox"/> NO |   |   |   |   |                      |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |

Page \_\_\_\_\_ of \_\_\_\_\_

WHITE - ALLIANCE COPY FOR RETURN TO CLIENT

YELLOW - ALLIANCE COPY

PINK - SAMPLER COPY