

CLIENT INFORMATION

COMPANY: Geop Inc
ADDRESS: 8 CARRIAGE
CITY: Juccasville STATE: NJ ZIP: 07876
ATTENTION:
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Stockton
PROJECT NO.: LOCATION: NJ
PROJECT MANAGER: GL
e-mail:
PHONE: 973 294 1771 FAX:

CLIENT BILLING INFORMATION

BILL TO: Geop Inc PO#:
ADDRESS: 8 CARRIAGE
CITY: Juccasville STATE: NJ ZIP: 07876
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) STANDARD 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 Excel
☒ EDD FORMAT MS Excel

PCB's
TRC Metals
EDH Cat 2
1,4 Dioxane

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.	GST1	S01	X	X	4/4/25	1230	1	X	X	X	X						
2.	GST2	S01	X	X	4/4/25	1248	1	X	X	X	X						
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. <u>MA</u>	DATE/TIME: <u>4/4/25</u>	RECEIVED BY: 1. <u>[Signature]</u> <u>4/4/25</u> <u>1234</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.8</u> °C Comments: <u>(Adjust FACTOR H)</u> <u>IR gun #1</u>
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	

Page ____ of CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO