



SHIPPING DOCUMENTS

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: Geop Inc
ADDRESS: 8 CARRIAGE
CITY: Succasunna STATE: NJ ZIP:
ATTENTION:
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: ANN
PROJECT NO.: LOCATION: NJ
PROJECT MANAGER: GL
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: Geop Inc PO#:
ADDRESS: 8 CARRIAGE
CITY STATE: NJ ZIP:
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 ☐ Other
EDD FORMAT hazsp8 MODP

TEL VER + 15 Tics
TEL 604120 P115

1	2	3	4	5	6	7	8	9
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PRESERVATIVES

COMMENTS

← Specify Preservatives
A-HCl D-NaOH
B-HNO3 E-ICE
C-H2SO4 F-OTHER

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		OF BOTTLES									
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9
1.	<u>MW4</u>	<u>GW</u>		<u>X</u>	<u>4/9/25</u>	<u>10:2</u>	<u>2</u>	<u>X</u>								
2.	<u>MW5</u>	<u>GW</u>		<u>X</u>	<u>4/9/25</u>	<u>4:15</u>	<u>4</u>	<u>X</u>	<u>X</u>							
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: <u>4/9/25</u>	RECEIVED BY:
1. <u>Hcl</u>		1. <u>[Signature]</u>
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:
2.		2.
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:
3.		3.

Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 21 °C
Comments: IF Cont 1

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

Laboratory Certification

Certified By	License No.
CAS EPA CLP Contract	68HERH20D0011
Connecticut	PH-0830
DOD ELAP (ANAB)	L2219
Maine	2024021
Maryland	296
New Hampshire	255424 Rev 1
New Jersey	20012
New York	11376
Pennsylvania	68-00548
Soil Permit	525-24-234-08441
Texas	T104704488

LOGIN REPORT/SAMPLE TRANSFER**Order ID :** Q1762 GENV01**Order Date :** 4/9/2025 2:47:49 PM**Project Mgr :****Client Name :** G Environmental**Project Name :** ANN**Report Type :** ~~Level 1~~ NJ Reduced**Client Contact :** Gary Landis**Receive DateTime :** 4/9/2025 1:45:00 PM**EDD Type :** Excel NJ**Invoice Name :** G Environmental**Purchase Order :****Hard Copy Date :****Invoice Contact :** Gary Landis**Date Signoff :**

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
Q1762-01	MW4	Water	04/09/2025	13:10	VOC-TCLVOA-10		8260D		10 Bus. Days
Q1762-02	MW5	Water	04/09/2025	12:15	VOC-TCLVOA-10		8260D		10 Bus. Days

YG 04/15/2025

Relinquished By : **Date / Time :** 4-9-25 1525**Received By :** **Date / Time :** 4/9/25 1525**Storage Area :** VOA Refridgerator Room