

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING INFORMATION

REPORT TO BE SENT TO:

COMPANY: Aramark Uniforms
ADDRESS: 740 Frelinghuysen Ave.
CITY Newark STATE: NJ ZIP: 07114
ATTENTION: Jarrod Mills
PHONE: 973-824-1101 FAX:

PROJECT NAME: Monthly
PROJECT NO.: LOCATION:
PROJECT MANAGER:
e-mail:
PHONE: FAX:

BILL TO: PO#: ADDRESS:
CITY STATE: ZIP:
ATTENTION: PHONE:
ANALYSIS

DATA TURNAROUND INFORMATION

DATA DELIVERABLE INFORMATION

FAX (RUSH) DAYS*
HARDCOPY (DATA PACKAGE): DAYS*
EDD: DAYS*
*TO BE APPROVED BY CHEMTECH
STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

☐ 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

TPH
BOD5
TSS

1	2	3	4	5	6	7	8	9
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ALLIANCE
SAMPLE
ID

PROJECT
SAMPLE IDENTIFICATION

SAMPLE
MATRIX

SAMPLE
TYPE

SAMPLE
COLLECTION

OF BOTTLES

PRESERVATIVES

COMMENTS

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

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

Grab
Comp

W
W

COMP

GRAB

DATE

TIME

C E E
1 2 3 4 5 6 7 8 9

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER:

DATE/TIME: 1210

RECEIVED BY:

1210

Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP

1. For E. Sawyer

4-9-25

1

4-9-25

Comments: Temp 4.5°C (Adjustment factor + 1) IR Gen # 1

RELINQUISHED BY SAMPLER:

DATE/TIME:

RECEIVED BY:

2.

DATE/TIME:

2.

RELINQUISHED BY SAMPLER:

DATE/TIME: 1800

RECEIVED BY:

3.

4-9-25

3.

Page ____ of

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO