Alliance TECHNICAL GROUP

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ALLIANCE PROJECT NO.
QUOTE NO. Q1835
COC Number 2045907

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: HOLLAND MFG CO
ADDRESS: 15 MAIN ST
CITY SUCCASUNNA STATE: NJ ZIP: 07846
ATTENTION:
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: HMC PRETREATMENT
PROJECT NO.: LOCATION:
PROJECT MANAGER: TODD HOLLAND
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

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

DATA TURNAROUND INFORMATION

FAX (RUSH) _____ 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 2 (Results + QC)
- ☐ Level 3 (Results + QC + Raw Data)
- ☐ Level 4 (QC + Full Raw Data)
- ☐ NJ Reduced
- ☐ US EPA CLP
- ☐ NYS ASP A
- ☐ NYS ASP B
- ☐ Other
- ☐ EDD FORMAT

ANALYSIS

1	2	3	4	5	6	7	8	9
BOD5	TSS	O+G	PO4	TOTAL P	NH3			

PRESERVATIVES

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

COMMENTS

← Specify Preservatives
A-HCl D-NaOH
B-HN03 E-ICE
C-H2SO4 F-OTHER

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE COMP	SAMPLE TYPE GRAB	SAMPLE COLLECTION DATE	SAMPLE COLLECTION TIME	# OF BOTTLES	1	2	3	4	5	6	7	8	9	COMMENTS
1.	EFFLUENT	W		✓	4/17	12:30	6	X	X	X	X	X	X				
2.	AERATION	W		✓	4/17	12:30	1		X								
3.	INFLUENT	W		✓	4/17	12:10	2	X					X				
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:	RECEIVED BY:
1. E MARINEZ	4/17 1300	1 4-17-25 1455
2.		2.
3.		3.

Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 2.2 °C
Comments: Adjust Factor +1 IN Row #1
LAB TO FILTER

Page _____ of

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete ☐ YES ☐ NO

WHITE - ALLIANCE COPY FOR RETURN TO CLIENT YELLOW - ALLIANCE COPY PINK - SAMPLER COPY