

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

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 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 _____

1 2 3 4 5 6 7 8 9

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS	
			COMP	GRAB	DATE	TIME		C	E	E							← Specify Preservatives	
1.	Grab	W			4-23-25	1255	1	✓									A-HCl	D-NaOH
2.	comp	W	✓		4-23-25	1257	2	✓	✓								B-HNO3	E-ICE
3.																	C-H2SO4	F-OTHER
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>Joe Placago</u>	DATE/TIME: <u>1300 4-23-25</u>	RECEIVED BY: 1. <u>[Signature]</u>	DATE/TIME: <u>1300 4-23-25</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.5</u> °C
RELINQUISHED BY SAMPLER: 2. <u>[Signature]</u>	DATE/TIME:	RECEIVED BY: 2. <u>[Signature]</u>	DATE/TIME:	Comments: <u>Temp 2.5° Adjustment factor #17 IR Gun #1</u>
RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u>	DATE/TIME: <u>1430 4-23-25</u>	RECEIVED BY: 3. <u>[Signature]</u>	DATE/TIME:	Page ____ of

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO