

## SHIPPING DOCUMENTS

http://www.contestlabs.com

Doc # 381 Rev 4\_01/08/2020

Chemtech	Phone: (908) 789-8900	East Longin Country, NAV 1020											Page1 of1									
Fax: (908) 789-8922 284 Sheffield Street, Mountainside, NJ 07092			5-Day 10-Day			O Field Filtered					M/O				LYSIS REQUESTED						2 -	
Company Name:	Nobis Group		PFAS 10-Day	(std)	Due Date		ľ		Lab to Fi			WO		H	i i	÷	-	-	H	Ė	-	<sup>2</sup> Preservation Code
Address:	55 Technology Dr Suite 101, Lowe	ll, MA 01851		Rush-Approva						e Samples	3	ı ı										Total Number Of:
Phone:	978-703-6014		1-Day		3-Day		0	THE RESERVE OF THE PARTY OF THE	ield Filt	0.000000		1										Total Number OF.
Project Name:	Raymark		2-Day	Π	4-Day	$\overline{\Box}$	0		Lab to Fi	ilter		1						6010		6020		VIALS
Project Location:	Stratford, CT					Data Del	ivery				TU	1						8				GLASS
Project Number: 95700			Format: PDF V EXCEL V			EXCEL PCB ONLY			1								2		PLASTIC			
			Other:							1						뿟		Metals		BACTERIA		
Con-Test Quote Name/Number	:		CLP Like Dat	a Pkg Require	d: 🔲	No	SUXH	LEI		L	<b>√</b>				ایرا			+		₩.		ENCORE
Invoice Recipient:			Email To:	aroy@nobi	s-group.	com	NON	NOVI II		-	_	VOCs	٠,		<del>ë</del>	es		<u>S</u>	١.,	ہم		
Sampled By: B. Fortier			Fax To #:					NON SOXHLET				18	į		قِ: ا ؞	<u>ĕ</u>		S	ğ	2		
Con-Test Work Order#	Client Sample ID / Description	Beginning Date/Time	Ending Date/Time	COMP/GRAB	<sup>1</sup> Matrix Code	Conc Code	VIALS	GLASS	PLASTIC	BACTERIA	ENCORE	Ι۵.	% Solids	PAHs	Herbicides	Pesticides	PCBs	Metals	Cyanide	SPLP RCP		Glassware in the fridge? Y / N
	OU4-PCS-TC-36-060525	6/5/25	11:25	G	so		3	2	1			Х	Х	Х	Х	Х	Х	Х	Х	Х		Glassware in freezer? Y / N
	OU4-PCS-TC-37-060525	6/5/25	11:35	G	SO		3	2	1			Х	Х	Х	Х	Х	Х	Х	Х	Х		Prepackaged Cooler? Y / N
	OU4-TS-29-060525	6/5/25	13:30	G	SO			1		1								Х				*Contest is not responsible for
	OU4-TS-30-060525	6/5/25	13:35	G	so			1										Х				missing samples from prepacked coolers
Retinquished by (signature)  Received by: (signature)  Retinquished by: (signature)	Date/Time:	5	nts:	rements			Sp	ecial Re	quireme	ents												1 Matrix Codes: GW = Ground Water WW = Waste Water DW = Drinking Water A = Air S = Soil SL = Sludge SOL = Solid O = Other (please define)  2 Preservation Codes: I = Iced H = HCL M = Methanol
Received by: (signature)  Relinquished by: (signature)  Date/Time:  Date/Time:			MA MCP Required  MCP Certification Form Required  CT RCP Required  CT RCP Required  RCP Certification Form Required  RCP Certification Form Required  RCP Certification Form Required							ithin t :	ne N = Nitric Acid											
Received by: (signature)	Date/Time:	Other:		PWSID#					MA State DW Required					MPLAC - A MUA LAG A D CA - 100 A							X = Sodium Hydroxide	
		Project Entity					The state of the s					NELAC and AIHA-LAP, LLC Accredited  Other  (RTA							T = Sodium Thiosulfate			
Received by: (signature)	Date/Time:		Federal City		21 J Brownfie				MWRA School MBTA			WR	IA							LAP,L		O = Other (please define)
Lab Comments: 3.4°C									Chain o analy	of Custody ses the la	y is a leg aborato	gal do ry will	cume l perf	nt tha orm. on eac	at mus Any r	st be nissir ject a	comp g info and w	lete ormat ill try	and a ion is to a	ccura not f	te and the la	the Chain of Custody. The d is used to determine what boratory's responsibility. nissing information, but will



## 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

QA Control Code: A2070148



284 Sheffield Street, Mountainside, New Jersey 07092, Phone: 908 789 8900,

Fax: 908 789 8922

## LOGIN REPORT/SAMPLE TRANSFER

Order ID: Q2259

NOBI03

**Order Date:** 6/6/2025 10:57:00 AM

Project Mgr:

Client Name: Nobis Group

Project Name: Raymark Superfund Site

Report Type: Level 4

Client Contact: Adam Roy

Receive DateTime: 6/6/2025 10:04:00 AM

**EDD Type:** EQUIS

Invoice Name: Nobis Group

Purchase Order:

Hard Copy Date:

Invoice Contact: Adam Roy

Date Signoff:

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD		FAX DATE	DUE DATES
Q2259-01	OU4-PCS-TC-36-060525	Solid	06/05/2025	11:25						
					VOCMS Group3		8260D	10 Bus. Days		
Q2259-03	OU4-PCS-TC-37-060525	Solid	06/05/2025	11:35						
					VOCMS Group3		8260D	10 Bus. Days		

Relinguished By:

Date / Time:

Received By:

Date / Time : 🕖

Storage Area: VOA Refridgerator Room

-11:36 PS 16