

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: Europastay USA
ADDRESS: 571 JERSEY AVE
CITY NEW BRUNSWICK STATE: NJ ZIP: 08901
ATTENTION: KEVIN CARLUCCI
PHONE: 631 563 6262 FAX: X2602

CLIENT PROJECT INFORMATION

PROJECT NAME: MCUA Permit No 14241-571 Jersey Ave NB-NJ
PROJECT NO.: LOCATION:
PROJECT MANAGER:
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

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

TPH ORG PH, BOD5 TSS MET. Group 3 COD PFAS
1 2 3 4 5 6 7 8 9

PRESERVATIVES

COMMENTS

| ALLIANCE SAMPLE ID | PROJECT SAMPLE IDENTIFICATION | SAMPLE MATRIX | SAMPLE TYPE | | SAMPLE COLLECTION | | # OF BOTTLES | | | | | | | | | | COMMENTS |
|--------------------------|----------------------------------|------------------|----------------|------|----------------------|------|--------------|---|---|---|---|---|---|---|---|---|----------|
| | | | COMP | GRAB | DATE | TIME | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | |
| 1. | MH-6-10-2025 | W. | | X | 6/9/0 | 1110 | 11 | X | X | X | X | X | X | X | | | |
| 2. | | | | | | | | | | | | | | | | | |
| 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: 1. <u>[Signature]</u> | DATE/TIME: <u>1115</u> <u>6/10/25</u> | RECEIVED BY: 1. <u>[Signature]</u> | Conditions of bottles or coolers at receipt: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP <u>3.2</u> °C Comments: |
| RELINQUISHED BY SAMPLER: 2. <u>[Signature]</u> | DATE/TIME: | RECEIVED BY: 2. <u>[Signature]</u> | |
| RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u> | DATE/TIME: <u>1230</u> <u>6/10/25</u> | RECEIVED BY: 3. <u>[Signature]</u> | CLIENT: <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Other Page <u>1</u> of <u>1</u> Shipment Complete <input type="checkbox"/> YES <input type="checkbox"/> NO |