

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Resolution Consultants
ADDRESS:
CITY STATE ZIP:
ATTENTION: Eleanor V.
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: NWIRP Bethpage
PROJECT NO.: 6073/872 LOCATION: Bethpage
PROJECT MANAGER: Eleanor Vivian
e-mail: Eleanor.Vivian@alliance.com
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: Eleanor V. PO#:
ADDRESS: 27 Ellis place
CITY Ossining STATE: NY ZIP: 10562
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) DAYS*
HARDCOPY (DATA PACKAGE): Standard DAYS*
EDD: Standard 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

VOCs 8260
1,4 dioxane 827051

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER
			COMP	GRAB	DATE	TIME		A	F								
1.	TT20551-20250617	GW		X	6/17	1240	3	2	1								
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>Memo Adams</u>	DATE/TIME: <u>6-18-25</u>	RECEIVED BY: <u>[Signature]</u> <u>6-18-25</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.30</u> °C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY:	Comments:
RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u>	DATE/TIME: <u>6-18-25</u>	RECEIVED BY: 3.	

Page ____ of ____

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO