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ALLIANCE PROJECT NO. Q2363
QUOTE NO.
COC Number 2046403

CLIENT INFORMATION

COMPANY: G Environmental
ADDRESS: 8 Carriage Lane
CITY: Succasunna STATE: NJ ZIP:
ATTENTION:
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: CAPRA
PROJECT NO.: LOCATION: NJ
PROJECT MANAGER: BL
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: G Environmental PO#:
ADDRESS: 8 Carriage Lane
CITY: Succasunna STATE: NJ ZIP:
ATTENTION: PHONE:
ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) 5 day TAT 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: NYS ASP
☒ EDD FORMAT: Excel, Word, PDF

1. TEL VOCs
2. Pb (lead)
3. EPA Cat 1
4. GW TEL VOCs
5. TEL VOCs
6. Pb (lead)
7. EPA Cat 1
8. TEL VOCs
9. Pb (lead)

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS ← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	G-CAP1	Soil			6/18/25	1430	1	X	X	X							
2.	G-CAP1W	GW			6/18/25	1445	2					X					
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. Hcl	DATE/TIME: 6/18/25 1540	RECEIVED BY: [Signature]	Conditions of bottles or coolers at receipt: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP 2.6 °C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY:	Comments: 5 day TAT
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY:	Page ____ of CLIENT: <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Other Shipment Complete <input type="checkbox"/> YES <input type="checkbox"/> NO