

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: **Atlas**
ADDRESS: **104 E 25th St**
CITY: **NY** STATE: **NY** ZIP: **10010**
ATTENTION: **C. Cosenza**
PHONE: **212338280** FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: **SCA-K262**
PROJECT NO.: **2023 SCA024** LOCATION: **Brooklyn**
PROJECT MANAGER: **d. cosenza**
e-mail: **denise.cosenza@oreoatlas.com**
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: PO#:
ADDRESS:
CITY: STATE: ZIP:
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) _____ DAYS*
HARDCOPY (DATA PACKAGE): **5 day** 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

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	PRESERVATIVES									← 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.	K262-22B	S		X	8/19/25	11:23	1	X									HOLD
2.	K262-22C	S		X	8/19/25	11:25	1	X									HOLD
3.	K262-23A	S		X	8/19/25	11:29	1	X									HOLD
4.	K262-23B	S		X	8/19/25	11:30	1	X									HOLD
5.	K262-23C	S		X	8/19/25	11:33	1	X									HOLD
6.	K262-24A	S		X	8/19/25	11:37	1	X									HOLD
7.	K262-24B	S		X	8/19/25	11:39	1	X									HOLD
8.	K262-24C	S		X	8/19/25	11:40	1	X									HOLD
9.	K262-T24P1	S		X	8/19/25		1	X									
10.	K262-T24P2	S		X	8/19/25		1	X									

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP
1.	8/19/25	1. 1342 8-20-25	3.1 °C
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	Comments:
2.		2.	
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
3.	8-20-25	3.	

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: AHES
ADDRESS: 104 E 25th St
CITY: NY STATE: NY ZIP: 10010
ATTENTION: d. cosenza
PHONE: 2123538180 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: SCA-K262
PROJECT NO.: 2025SCA024 LOCATION: Brooklyn
PROJECT MANAGER: d. cosenza
e-mail: denise.cosenza@oreatho.com
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: PO#: ADDRESS: CITY: STATE: ZIP: ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

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+ 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		1	2	3	4	5	6	7	8	9	← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER	
1.	K262-Dup 3	S		X	8/19/25	—	1	X										
2.	K262-Dup 4	S		X	8/19/25	—	1	X										
3.	K262-Dup 5	S		X	11	—	1	X										HOLD
4.	K262-Dup 6	S		X	11	—	1	X										HOLD
5.	K262-Dup 7	S		X	11	—	1	X										HOLD
6.	K262-Dup 8	S		X	11	—	1	X										HOLD
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>8/19/25</u>	RECEIVED BY: 1. <u>[Signature]</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>3.1</u> °C
RELINQUISHED BY SAMPLER: 2. <u>[Signature]</u>	DATE/TIME:	RECEIVED BY: 2. <u>[Signature]</u>	Comments:
RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u>	DATE/TIME: <u>8-20-25</u>	RECEIVED BY: 3. <u>[Signature]</u>	Page <u>8</u> of <u>8</u> CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete
☐ YES ☐ NO