

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Gannett Fleming
ADDRESS: 1010 Abrams Ave
CITY: Audubon STATE: PA ZIP: 19403
ATTENTION: Joe Krupansky
PHONE: 610-301-8342 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Amtrak Replacement of
Santoth Bridges
PROJECT NO.: LOCATION: Kearny, NJ
PROJECT MANAGER: Joe Krupansky
e-mail: QAQC@bcnys.com
PHONE: 610-301-8342 FAX:

CLIENT BILLING INFORMATION

BILL TO: Alliance PO#:
ADDRESS: 284 Sheffield St
CITY: Mountainside STATE: NJ ZIP: 07092
ATTENTION: Yazmeen Gomez PHONE: 908-718-3198

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) _____ DAYS*
HARDCOPY (DATA PACKAGE): 10 DAYS*
EDD: 10 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 BEM

1. TCL-SVOCs+20
2. TCL-VOCs+10
3. PCBs
4. EPH
5. 5 TAL Metals
6. Cr(VI)/Cr(III)
7.
8.
9.

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS	
			COMP	GRAB	DATE	TIME		E	A	E	A	B	C				← Specify Preservatives A-HCl B-HNO3 C-H2SO4	D-NaOH E-ICE F-OTHER
								1	2	3	4	5	6	7	8	9		
1.	ENV-SW01	WS		G	8/21/25	940	8	X	X	X	X	X	X					
2.	ENV-SW02	WS		G	↓	1015	8	↓	↓	↓	↓	↓	↓					
3.	ENV-SW03	WS		G	↓	1100	8	↓	↓	↓	↓	↓	↓					
4.	ENV-SW04	WS		G	↓	1130	8	↓	↓	↓	↓	↓	↓					
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>Natalie Zucce</u>	DATE/TIME: <u>8/21/25 11:45</u>	RECEIVED BY: 1. <u>CR</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.3</u> °C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	Comments: <u>IRGent #1</u>
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	Page ____ of CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO