

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: CHA Consulting, Inc  
ADDRESS: 3 Winners Circle  
CITY Albany STATE: NY ZIP: 12205  
ATTENTION: Carrie Robinson  
PHONE: 518-453-8703 FAX: \_\_\_\_\_

CLIENT PROJECT INFORMATION

PROJECT NAME: NYSOMH Emergency Service  
PROJECT NO.: 98107.100 LOCATION: Kingsboro, PC  
PROJECT MANAGER: Carrie Robinson  
e-mail: crobinson@chasolutions.com  
PHONE: 518-453-8703 FAX: \_\_\_\_\_

CLIENT BILLING INFORMATION

BILL TO: invoices@chasolutions.com PO#: 098107.1001  
ADDRESS: \_\_\_\_\_  
CITY \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
ATTENTION: \_\_\_\_\_ PHONE: \_\_\_\_\_

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) results by 9/12/25 DAYS\*  
HARDCOPY (DATA PACKAGE): W DAYS\*  
EDD: need results by 9/12/25 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. Total Coliform  
2. Turbidity  
3. Chlorine  
4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_  
7. \_\_\_\_\_  
8. \_\_\_\_\_  
9. \_\_\_\_\_

PRESERVATIVES

COMMENTS

| ALLIANCE<br>SAMPLE<br>ID | PROJECT<br>SAMPLE IDENTIFICATION | SAMPLE<br>MATRIX | SAMPLE<br>TYPE |      | SAMPLE<br>COLLECTION |      | # OF BOTTLES |   |   |   |  |  |  |  |  |  | Specify Preservatives<br>A-HCl D-NaOH<br>B-HNO3 E-ICE<br>C-H2SO4 F-OTHER |
|--------------------------|----------------------------------|------------------|----------------|------|----------------------|------|--------------|---|---|---|--|--|--|--|--|--|--------------------------------------------------------------------------|
|                          |                                  |                  | COMP           | GRAB | DATE                 | TIME |              | F | - | - |  |  |  |  |  |  |                                                                          |
| 1.                       | B2-W16-Rm4080-Sink               | DW               |                | X    | 9/9/25               | 853  | 3            | X | X | X |  |  |  |  |  |  | F = Na2S2O3                                                              |
| 2.                       | B2-W16-Rm4056-Sink               | DW               |                | X    |                      | 907  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 3.                       | B2-W16-Rm4057-RH Sink            | DW               |                | X    |                      | 912  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 4.                       | B2-W16-LH Drinking Fountain      | DW               |                | X    |                      | 915  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 5.                       | B2-W16-Rm4065-Eyewash            | DW               |                | X    |                      | 922  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 6.                       | B2-W16-Rm4088-Sink               | DW               |                | X    |                      | 856  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 7.                       | B2-W16-Rm4075-Sink               | DW               |                | X    |                      | 902  | 3            | X | X | X |  |  |  |  |  |  |                                                                          |
| 8.                       |                                  |                  |                |      |                      |      |              |   |   |   |  |  |  |  |  |  |                                                                          |
| 9.                       |                                  |                  |                |      |                      |      |              |   |   |   |  |  |  |  |  |  |                                                                          |
| 10.                      |                                  |                  |                |      |                      |      |              |   |   |   |  |  |  |  |  |  |                                                                          |

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: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP <u>3.0</u> °C |
| 1. <u>[Signature]</u>    | <u>9/9/25 152</u>  | 1. <u>[Signature]</u> | Comments: _____                                                                                                                                                           |
| RELINQUISHED BY SAMPLER: | DATE/TIME:         | RECEIVED BY:          |                                                                                                                                                                           |
| 2. <u>[Signature]</u>    |                    | 2. <u>[Signature]</u> |                                                                                                                                                                           |
| RELINQUISHED BY SAMPLER: | DATE/TIME:         | RECEIVED BY:          |                                                                                                                                                                           |
| 2. <u>[Signature]</u>    | <u>9-9-25 1640</u> | 3. <u>[Signature]</u> |                                                                                                                                                                           |

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CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO