

284 Sheffield Street, Mountainside, NJ 07092 (908) 789-8900 Fax: (908) 788-9222 www.chemtech.net

CHAIN OF CUSTODY RECORD

Alliance	Proiect	Number:	Q3	0	9	4
TITICAL TOO			-	_	_	

COC Number:

CLIENT INFORMATION		PROJECT INFORMATION							BILLING INFORMATION												
COMPANY: Scientific Design		PROJECT NAME: Carr	BILL TO: PO#																		
ADDRESS:			PROJECT #: LOCATION: ADDRESS:																		
CITY:		STATE:	ZIP:	PROJECT MANAGER: Emily Chan							CITY: STATE: ZIP:										
ATTENTION:									ATTENTION: PHONE:												
PHONE:		FAX:		PHONE:		FAX:			ANALYSIS												
DATA TURNAROUND INFORMATION		DATA DELIVERABLE INFORMATION																			
FAX: DAYS* HARD COPY: DAYS* EDD DAYS*			□ RESEULTS ONLY □ USEPA CLP □ RESULTS + QC □ New York State ASP "B" □ New Jersey REDUCED □ New York State ASP "A"						20 <u>1</u>	BOD											
STANDARD TUR	* TO BE APPROVED BY ALLIANCE STANDARD TURNAROUND TIME IS 10 BUSINESS DAYS		□ New Jersey CLP □ Other							2	3	4	5	6	7	8	9				
STREET STREET		□ EDD Format						PRESER					RVATIVES				COMMENTS				
Alliance PRO		PROJEC	:T	SAMPLE MATRIX	SAMPLE TYPE			AMPLE LECTION OF BOTTLES											< Specify Preservatives A-HCI B-HNO3		
SAMPLE ID	8	SAMPLE IDENTIFICATION			COMP	GRAB	DATE	TIME	# of B	1_	2	3	4	5	6	7	8	9	C-H2SO4 D-NaOH E-ICE F-Other		
1.	5670-18-	000F		Water			8/27/25	N/A	1	x											
2.	5674-08-0	001W		Water			9/9/25	N/A	1	х											
	5674-08-001WP		Water			9/10/25	N/A	1	x												
4.	5674-11-001C		Water			9/11/25	N/A	2	2 x	x											
5																					
6																					
3. 4. 5. 6.																					
8. 9. 10.																					
9.																					
10.																					
	SAMPLE	CUSTODY M	UST BE DOCU	MENTED BELOW	EACH	TIME	SAMP	LES CH	ANGE	PRO	SSE	SSIC	N IN	CLU	DING	CO	URIE	R DI	ELIVERY		
RELINQUISHED BY SAMPLER DATE/TIME RECEIVED BY 1. 1 2 5 1. 1 2 5 RELINQUISHED BY DATE/TIME RECEIVED BY 2.			Conditions of bottles or coolers at receipt: Compliant MeOH extraction requires an additional 4oz. Jar for percent solid Comments:																		
RELINQUISHED B	3Y	DATE/TIME	RECEIVED FOR L	AB BY	P	age	of		SHIPPE	D VIA:			and De		Over	-			Shipment Complete YES NO		
-				E COPYFOR RETURN			YELL	.OW - ALLI	ANCE C	OPY	PIN	IK - S	AMPL	ER C	PY						