

CLIENT INFORMATION

COMPANY: GECP INC  
ADDRESS: 8 Carriage  
CITY: Stuccasville STATE: NJ ZIP: 07874  
ATTENTION:  
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: 61 Laurel  
PROJECT NO.: LOCATION: NJ  
PROJECT MANAGER:  
e-mail:  
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: GECP INC PO#:  
ADDRESS: 8 Carriage  
CITY: Stuccasville STATE: NJ ZIP:  
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) Standard DAYS\*  
HARDCOPY (DATA PACKAGE) Standard 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 ☐ NYS ASP B  
+ Raw Data ☐ Other Level 2  
☒ EDD FORMAT Level 2

PRESERVATIVES

COMMENTS

← Specify Preservatives  
A-HCl D-NaOH  
B-HNO3 E-ICE  
C-H2SO4 F-OTHER

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	
1.	MW2	GW	X		9/15/1000		4		X	X							
2.																	
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:	DATE/TIME: <u>10:55</u>	RECEIVED BY: <u>[Signature]</u>	Conditions of bottles or coolers at receipt: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP <u>5.3</u> °C
1. <u>[Signature]</u>	DATE/TIME: <u>9-16-25</u>	RECEIVED BY: <u>[Signature]</u>	Comments: <u>MW2 VOC / BN H15 (no phenols) (no Sims)</u>
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
2.			
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
3.			