

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Always Available Construction
ADDRESS: 20 Dead River Rd-
CITY: WARREN STATE: NJ ZIP: 07059
ATTENTION: Michael Roth
PHONE: (973) 699-4453 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Yard Soil Cleanup
PROJECT NO.: LOCATION:
PROJECT MANAGER:
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

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

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) DAYS*
HARDCOPY (DATA PACKAGE): DAYS*
EDD: 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:
VOCs TCLP VOCs GND, DRO SDOC, PEST. PCBs MET. TOB-TAL Heavy Duty Cuv. Full TCLP

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS	
			COMP	GRAB	DATE	TIME		E/F	E	E	E	E	E	E				
1.	20 DEAD-1	S.	X		9/19/25	1:45pm	11	X	X	X	X	X	X	X				
2.	20 DEAD-1	W			9/19/25	1:45pm	4	X	X									
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: 1. <u>Michael Roth</u>	DATE/TIME: <u>9/19/25</u>	RECEIVED BY: 1. <u>CR</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>26.1</u> °C Comments: <u>IRB #1</u>
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	

Page ____ of CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO