

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: Armark uniforms
ADDRESS: 740 Frelinghuysen Ave
CITY Newark STATE: NJ ZIP: 07114
ATTENTION: Jarrod Mills
PHONE: 973-824-1101 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Monthly 2025
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
TPH
BODS
TSS
metals-ICP-MS

ALLIANCE
SAMPLE
ID

PROJECT
SAMPLE IDENTIFICATION

SAMPLE
MATRIX

SAMPLE
TYPE
COMP GRAB

SAMPLE
COLLECTION
DATE TIME

OF BOTTLES

PRESERVATIVES

COMMENTS

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

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

Grab
Comp

W
W

✓
✓

10-1-25 1050
10-1-25 1052

1
3

C E E B
1 2 3 4 5 6 7 8 9

✓
✓ ✓ ✓

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER: DATE/TIME: 1055 RECEIVED BY: 1055
1. [Signature] 10-1-25 1. [Signature] 10-1-25
RELINQUISHED BY SAMPLER: DATE/TIME: RECEIVED BY:
2. 2.
RELINQUISHED BY SAMPLER: DATE/TIME: 1615 RECEIVED BY:
3. [Signature] 10-1-25 3.

Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 2.20 °C
Comments:

Page ____ of ____

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete
☐ YES ☐ NO