

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: Total Quality Environmental
ADDRESS: 116 Bay 19th St.
CITY Brooklyn STATE: NY ZIP: 11214
ATTENTION: A. Rukason
PHONE: 718-873-1411 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME:
PROJECT NO.: 25527.01 LOCATION: NYC
PROJECT MANAGER:
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: Same 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 _____

Pb.
1 2 3 4 5 6 7 8 9

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	Basement, Kitchen (1st draw)				10/10	13:05											pH 1.3
2.	↓ (2nd draw)				10/10	13:05											
3.	Adult Bathroom (1st draw)				10/10	13:08											
4.	↓ (2nd draw)				10/10	13:09											
5.	Drinking Fountain (1st draw)				10/10	13:12											
6.	↓ (2nd draw)				10/10	13:12											
7.	Kids Bathroom L. (1st draw)				10/10	13:15											
8.	↓ L. (2nd draw)				10/10	13:16											
9.	↓ R. (1st draw)				10/10	13:19											
10.	↓ R. (2nd draw)				10/10	13:19											

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: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>4.9°C</u>
1.		1. <u>[Signature]</u> <u>10/13/25</u>	Comments:
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
2.		2.	
RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:	
3.		3.	

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING INFORMATION

REPORT TO BE SENT TO:

COMPANY: **Total Quality Environmental**
ADDRESS: **116 Bay 19th St**
CITY: **Brooklyn** STATE: **NY** ZIP: **11214**
ATTENTION: **A. Rucason**
PHONE: **718-873-1411** FAX:

PROJECT NAME:
PROJECT NO: **255.2701** LOCATION: **NYC**
PROJECT MANAGER:
e-mail:
PHONE: FAX:

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

ANALYSIS

DATA TURNAROUND INFORMATION

DATA DELIVERABLE INFORMATION

FAX (RUSH) _____ DAYS*
HARDCOPY (DATA PACKAGE): _____ DAYS*
EDD: _____ DAYS*
*TO BE APPROVED BY CHEMTECH
STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

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☐ Level 3 (Results + QC) ☐ NYS ASP A ☐ NYS ASP B
+ Raw Data) ☐ Other _____
☐ EDD FORMAT _____

Pb.
1 2 3 4 5 6 7 8 9

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	← Specify Preservatives A-HCl D-NaOH B-HNO3 E-ICE C-H2SO4 F-OTHER	
11.	Main hall L. (1st draw)				10/10	13:22											PH 1.3 I	
12.	↓ L. (2nd draw)				10/10	13:23												
13.	↓ R. (1st draw)				10/10	13:25												
14.	↓ R. (2nd draw)				10/10	13:26												
5.																		
6.																		
7.																		
8.																		
9.																		
10.																		

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

RELINQUISHED BY SAMPLER: 1.	DATE/TIME:	RECEIVED BY: 1. D 700 10/13/25	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 4.9°C
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	Comments:
RELINQUISHED BY SAMPLER: 3.	DATE/TIME:	RECEIVED BY: 3.	Page 2 of 2 CLIENT: ☐ Hand Delivered ☐ Other Shipment Complete ☐ YES ☐ NO