

CLIENT INFORMATION

COMPANY: Environmental
ADDRESS: 8 CARRAGE
CITY: Succasunna STATE: ST ZIP:
ATTENTION:
PHONE: FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: BANK
PROJECT NO.: LOCATION: NJ
PROJECT MANAGER: GL
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: Environmental PO#:
ADDRESS: 8 CARRAGE
CITY: Succasunna STATE: NJ ZIP:
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) Standard DAYS*
HARDCOPY (DATA PACKAGE): Standard 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 Hardcopy, Excel

1	2	3	4	5	6	7	8	9
<u>Na (sodium)</u>								
<u>Chloride</u>								

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	
1.	MW25	GW		X	10/16/25	0925	2		X		X							
2.	MW20	GW				1039			X		X							
3.	Supply	DW				1100			X		X							
4.	17 Harvey	DW				1110			X		X							
5.	19 Harvey	DW		X	10/16/25	1119	2		X		X							
6.																		
7.																		
8.																		
9.																		
10.																		

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

RELINQUISHED BY SAMPLER: 1. <u>[Signature]</u>	DATE/TIME: <u>10/16/25</u>	RECEIVED BY: 1. <u>[Signature]</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.1</u> °C
RELINQUISHED BY SAMPLER: 2. <u>[Signature]</u>	DATE/TIME: <u></u>	RECEIVED BY: 2. <u></u>	Comments: <u>IL Gu #1</u>
RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u>	DATE/TIME: <u></u>	RECEIVED BY: 3. <u></u>	Page <u></u> of <u></u> CLIENT: ☐ Hand Delivered ☐ Other <u></u> Shipment Complete ☐ YES ☐ NO