

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: AECOM
ADDRESS: 605 3rd Ave
CITY New York STATE: NY ZIP: 10158
ATTENTION: Rob Forstner
PHONE: 212-377-8721 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Port Richmond
PROJECT NO.: 60693795 LOCATION: Staten Island
PROJECT MANAGER: Rob Forstner
e-mail: robert.forstner@aecom.com
PHONE: 212-377-8721 FAX:

CLIENT BILLING INFORMATION

BILL TO: AECOM PO#:
ADDRESS: 605 3rd Ave
CITY New York STATE: NY ZIP: 10138
ATTENTION: Rob Forstner PHONE: 212-377-8721

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

SVOCs
Pesticides - TCL
Micro Metals
DBP 2/Hexachlor
Dioxin
Gram Size
TAC
VOCs

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.	PRI32-S05-057082-20251016	S		X	10/16	1035	11	X	X	X	X	X	X	X	X		
2.	PRI32-DP01-20251016	S		X	10/16	1050	11	X	X	X	X	X	X	X	X		
3.	PRI32-COMP2-20251016	S	X		10/16	1250	11	X	X	X	X	X	X	X	X		
4.	PRI32-S12-047072-20251016	S		X	10/16	1325	11	X	X	X	X	X	X	X	X		
5.	PRI32-S12-020047-20251016	S		X	10/16	1315	11	X	X	X	X	X	X	X	X		
6.	PRI32-FB01-20251016	A			10/16	1355	1	X	X	X	X	X			X		
7.	Temp Blank	A													X		
8.																	
9.																	
10.																	

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

RELINQUISHED BY SAMPLER: 1. Jim Alderson	DATE/TIME: 1650 10/16/25	RECEIVED BY: 1. [Signature] 10-16-25	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 3.2 °C
RELINQUISHED BY SAMPLER: 2. [Signature]	DATE/TIME:	RECEIVED BY: 2. [Signature]	Comments:
RELINQUISHED BY SAMPLER: 3. [Signature]	DATE/TIME: 1805 10-16-25	RECEIVED BY: 3. [Signature]	Page ____ of

CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete
☐ YES ☐ NO