



SHIPPING DOCUMENTS

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING 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:

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

BILL TO: AECOM PO#:
ADDRESS:
CITY STATE: ZIP:
ATTENTION: Rob Forstner 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

☐ 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. SVOCs
2. Pesticides TCL
3. Mercury Metals
4. PCBs Hexachloro
5. Dioxin
6. Grain Size
7. TOCs
8. VOCs
9.

PRESERVATIVES

COMMENTS

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	
1.	PR132 PR132-DP3-202S1021	S		X	10/21	9:20	11	X	X	X	X	X	X	X	X		
2.	PR132-S11-010080-202S1021	S		X	10/21	9:15	11	X	X	X	X	X	X	X	X		
3.	PR132-S14-000094-202S1021	S		X	10/21	9:25	11	X	X	X	X	X	X	X	X		
4.	Temp Blank	A			10/21		1	X	X	X	X	X	/		X		
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>Jim Alderson</u>	DATE/TIME: <u>10/21/25 4:30</u>	RECEIVED BY: <u>[Signature]</u> <u>1635</u> <u>10-21-25</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>2.0</u> °C Comments:
RELINQUISHED BY SAMPLER: 2.	DATE/TIME:	RECEIVED BY: 2.	
RELINQUISHED BY SAMPLER: 3. <u>[Signature]</u>	DATE/TIME: <u>10-21-25</u>	RECEIVED BY: 3.	

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CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO

Laboratory Certification

Certified By	License No.
Connecticut	PH-0830
DOD ELAP (ANAB)	L2219
Maine	2024021
Maryland	296
New Hampshire	255425
New Jersey	20012
New York	11376
Pennsylvania	68-00548
Soil Permit	525-24-234-08441
Texas	TX-C25-00189
Virginia	460312

LOGIN REPORT/SAMPLE TRANSFER

Order ID : Q3424	Order Date : 10/22/2025 11:34:00 AM	Project Mgr :
Client Name : AECOM	Project Name : AE1-CTY 3.2.Z-PR-DOCK	Report Type : NYS ASP ^B
Client Contact : Rob Forstner	Receive DateTime : 10/21/2025 5:40:00 PM	EDD Type : EQUIS
Invoice Name : AECOM	Purchase Order :	Hard Copy Date :
Invoice Contact : Rob Forstner		Date Signoff :

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
Q3424-01	PR132-DP3-20251021	Solid	10/21/2025	09:20					
					VOC-TCLVOA-10		8260D		10 Bus. Days
Q3424-02	PR132-S11-010080-20251021	Solid	10/21/2025	09:15					
					VOC-TCLVOA-10		8260D		10 Bus. Days
Q3424-03	PR132-S14- ⁰⁰⁰⁰⁹⁴ 00094 -20251021	Solid	10/21/2025	09:25					
					VOC-TCLVOA-10		8260D		10 Bus. Days

Relinquished By : 

Date / Time : 10/22/25 1245

Received By : 

Date / Time : 10/22/25 1245

Storage Area : VOA Refridgerator Room