



SHIPPING DOCUMENTS



301 Fulling Mill Rd, Suite A
Middletown, PA 17057
P. 717-944-5541

CHAIN OF CUSTODY/ REQUEST FOR ANALYSIS

ALL SHADED AREAS MUST BE COMPLETED BY THE CLIENT /
SAMPLER. INSTRUCTIONS ON THE BACK.

COC #:	Q3606	of
ALS Quote #:		

Client Name: ALS Middletown			Container Type		CG										Receipt Information (completed by Receiving Lab)			
Address: 301 Fulling Mill Rd Middletown PA 17057			Container		4oz										Temp Taken By:	Therm ID:	WO Temp (°C)	
			Size													Receipt Info completed by: _____		
			Preservative		UNP												WV Containers	0-6°C
Contact: Jessica Smith Phone#: 717-944-5541 Project Name#: 3441649 Bill To: Same Purchase Order #: 40-3441649			Orthophosphate Filtered?		Yes	No	Hexavalent Chromium Filtered?		Yes	No					Cooler Custody Seals Intact	Y N NA	Deviations? NO YES	
																Sample Custody Seal Intact	Y N NA	If YES, list below:
Date Required: 11/17/2025 Email? [X] namdt.subcontract@alsglobal.com															Received on Ice	Y N NA		
																Coolers & Samples Intact	Y N	
TAT [] Normal-Standard TAT is 10-12 business days. [X] Rush-Subject to ALS approval and surcharges.															Correct Containers Provided	Y N		
																Sample Label/COC Agree	Y N	
Sample Description/Location (as it will appear on the lab report)															Adequate Sample Volumes	Y N		
																VOA only: Trip Blank	Y N NA	
Date Collected mm/dd/yy															NJ ≤ 4 days?	Y N		
																Courier/Tracking #		
Time hh:mm															Sample(s) for Radiation testing?	Y N	Rad Screen (uCi) _____	
																Reportable SDWA Sample(s)?	Y N	New Source? Y N
SDWA Sample Type (see key)															SDWA State of Origin?		New Source Contact:	
																PWSID # _____		
Date Collected mm/dd/yy															PWS Contact:		PWS Phone #:	
																SDWA Sample Type Key: D=Distribution E=Entry Point R=Raw P=Plant C=Check S=Special A=Annual Startup		
Time hh:mm															Sample/COC Remarks			
															Alliance Technical Group 284 Sheffield Street, Mountainside, NJ 07092			
Sample Description/Location (as it will appear on the lab report)															Contains Short Hold Testing YES NO			
															Internal Use: If less than 48 hours - notify lab upon receipt			
Date Collected mm/dd/yy															Data Deliverables			
															[X] Standard Lvl 1 [] CLP-like [] HSCA [] Standard Lvl 2 [] DOD [] Landfill [] Standard Lvl 3 [] NJ RED [] NJ GW [] Standard Lvl 4 [] NJ Full []			
Time hh:mm															EDDs			
															[] Excel Summary [] Sample Disposal [] Equis Lab [X] [] Custom Special []			
Date Collected mm/dd/yy															EDDS: Format Type _____			
Time hh:mm															State Samples Collected In			
															[] NY [X] NJ [] PA [] WV [] FL [] other			
Date Collected mm/dd/yy																		
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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