SHIPPING DOCUMENTS

Alliance TECHNICAL GROUP

284 Sheffield Street, Mountainside, NJ 07092
(908) 789-8900 • Fax (908) 789-8922
www.chemtech.net

ALLIANCE PROJECT NO.
QUOTE NO. Q 3614
COC Number 2045182

CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: Kleinfelder
ADDRESS: 180 Sheree Blvd. Suite 3800
CITY Exton STATE: PA ZIP: 19341
ATTENTION: Mark Warchol
PHONE: 484-883-3892 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Logan School
PROJECT NO.: LOCATION: Philadelphia, PA
PROJECT MANAGER: Mark Warchol
e-mail: mwarchol@kleinfelder.com
PHONE: 484-883-3892 FAX:

CLIENT BILLING INFORMATION

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

DATA TURNAROUND INFORMATION

FAX (RUSH) 5 DAYS*
HARDCOPY (DATA PACKAGE): 5 DAYS*
EDD: 5 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 + Raw Data)
- ☐ NYS ASP A
- ☐ NYS ASP B
- ☐ Other
- ☐ EDD FORMAT

ANALYSIS

PADEP Historic Logan Fill Parameters

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE COMP	SAMPLE TYPE GRAB	SAMPLE COLLECTION DATE	SAMPLE COLLECTION TIME	# OF BOTTLES	PRESERVATIVES 1	2	3	4	5	6	7	8	9	COMMENTS
								E									← Specify Preservatives A-HCl D-NaOH B-HN03 E-ICE C-H2SO4 F-OTHER
1.	COMP-1	Soil	✓		11/11/25	10:05	6	✓									
2.	COMP-2	↓	↓		↓	10:45	↓	↓									
3.	COMP-3	↓	↓		↓	11:30	↓	↓									
4.																	
5.																	
6.																	
7.																	
8.																	
9.																	
10.																	

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

RELINQUISHED BY SAMPLER:	DATE/TIME:	RECEIVED BY:
1.	11/11/25 15:00	1.
2.	11/12/25 1145	2.
3.		3.

Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP °C
Comments: 2.6 + 0 = 2.6°C
1 Cooler #1

Page 1 of 1

CLIENT: ☐ Hand Delivered ☑ Other FedEx

Shipment Complete ☐ YES ☐ NO

WHITE - ALLIANCE COPY FOR RETURN TO CLIENT YELLOW - ALLIANCE COPY PINK - SAMPLER COPY

284 Sheffield Street, Mountainside NJ 07092 (908)-789-8900 Fax : 908 789 8922

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

QA Control Code: A2070148

284 Sheffield Street, Mountainside, New Jersey 07092, Phone : 908 789 8900,
Fax :.908 789 8922

LOGIN REPORT/SAMPLE TRANSFER

Order ID : Q3614 POWE02
Client Name : Kleinfelder
Client Contact : Mark Warchol
Invoice Name : Kleinfelder
Invoice Contact : Mark Warchol

Order Date : 11/12/2025 11:51:00 AM
Project Name : Logan School
Receive DateTime : 11/12/2025 11:45:00 AM
Purchase Order :

Project Mgr :
Report Type : Results+QC
EDD Type : EXCEL NOCLEANUP
Hard Copy Date :
Date Signoff :

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
Q3614-01	COMP-1	Solid	11/11/2025	10:05					
					VOCMS Group1		8260D		5 Bus. Days
Q3614-02	COMP-2	Solid	11/11/2025	10:45					
					VOCMS Group1		8260D		5 Bus. Days
Q3614-03	COMP-3	Solid	11/11/2025	11:30					
					VOCMS Group1		8260D		5 Bus. Days

Relinguished By :
Date / Time : 11/12/25 1250

Received By :
Date / Time : 11/12/25 1252

Storage Area : **VOA Refridgerator Room**