
# SHIPPING DOCUMENTS

Alliance TECHNICAL GROUP

284 Sheffield Street, Mountainside, NJ 07092
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www.chemtech.net

ALLIANCE PROJECT NO.
QUOTE NO. Q36644
COC Number 2046868

## CLIENT INFORMATION

REPORT TO BE SENT TO:
COMPANY: DAL-Tile Quartz
ADDRESS: 1665 Old Columbia RD
CITY Dickson STATE: TN ZIP: 37055
ATTENTION: Tony Patterson
PHONE: 214 309 4003 FAX:

## CLIENT PROJECT INFORMATION

PROJECT NAME: Annual SW sample
PROJECT NO.: 2025 LOCATION: Quartz
PROJECT MANAGER: Tony Patterson
e-mail: Tony.Patterson@dalTile.com
PHONE: 629-294-0951 FAX:

## CLIENT BILLING INFORMATION

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

## 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 + Raw Data) ❑ NYS ASP A ❑ NYS ASP B
❑ Other _____
❑ EDD FORMAT _____

## ANALYSIS

TSS

## PRESERVATIVES

E

## COMMENTS

← Specify Preservatives
A-HCl D-NaOH
B-HN03 E-ICE
C-H2SO4 F-OTHER

| | 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. | Outfall001 | Outfall 001 | W | | X | 11-7-25 | 1042 | 1 | X | | | | | | | | |
| 2. | Outfall002 | Outfall 002 | W | | X | ↓ | 1043 | 1 | X | | | | | | | | |
| 3. | Outfall003 | Outfall 003 | W | | X | | 1036 | 1 | X | | | | | | | | |
| 4. | Outfall004 | Outfall 004 | W | | X | ↓ | 1105 | 1 | X | | | | | | | | |
| 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. | 11.12.25/3:32PM | 1. |
| 2. | 11/14/25 1035 | 2. |
| 3. | | 3. |

Conditions of bottles or coolers at receipt: ❑ COMPLIANT ❑ NON COMPLIANT ❑ COOLER TEMP 2.1°C +0° = 2.1°
Comments: JF-Cmk

Page ____ of

CLIENT: ❑ Hand Delivered ❑ Other

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 |