



SHIPPING DOCUMENTS

CLIENT INFORMATION

COMPANY: **Roman Ed G Corp.**
ADDRESS: **14 Ogden St**
CITY: **Newark** STATE: **NJ** ZIP: **07104**
ATTENTION: **Sonny Puzzo**
PHONE: **973-803-6113** FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: **Robbins Woodwicz pump station**
PROJECT NO.: **22-531** LOCATION: **Robbinsville**
PROJECT MANAGER: **Sonny Puzzo**
e-mail: **engineer@romaneg.com**
PHONE: **973-482-1123** FAX:

CLIENT BILLING INFORMATION

BILL TO: **Roman Ed G Corp.** PO#: **22-531**
ADDRESS: **14 Ogden St**
CITY: **Newark** STATE: **NJ** ZIP: **07104**
ATTENTION: **Sonny Puzzo** PHONE: **973-482-1123**

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 _____

STEVE 3/6/11

1	2	3	4	5	6	7	8	9
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PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES										← Specify Preservatives	
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	A-HCl B-HNO3 C-H2SO4	D-NaOH E-ICE F-OTHER
1.	Stock Pile Samples ↓	S		X	11-25													
2.		S																
3.		S																
4.		Ⓢ																
5.		S																
6.																		
7.																		
8.																		
9.																		
10.																		

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

RELINQUISHED BY SAMPLER: 1. Sonny Puzzo	DATE/TIME: 11/25	RECEIVED BY: 1.	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP 16.1 + 0 = 16.1 °C Comments: _____ _____ _____
RELINQUISHED BY SAMPLER: 2. Sonny Puzzo	DATE/TIME: 11/25	RECEIVED BY: 2.	
RELINQUISHED BY SAMPLER: 3. Amir Shalchian	DATE/TIME: 11/25	RECEIVED BY: JT	

Page ____ of ____ 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



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

LOGIN REPORT/SAMPLE TRANSFER

Order ID : Q3725 ROMA02

Order Date : 11/25/2025 4:38:51 PM

Project Mgr : Deepak

Client Name : Roman E&G Corp

Project Name : AQUA Woolwich Pump Sta

Report Type : Level 1

Client Contact : Sonny Puzzo

Receive DateTime : 11/25/2025 3:28:00 PM

EDD Type : EXCEL NJCLEANUP

Invoice Name : Roman E&G Corp

Purchase Order :

Hard Copy Date :

Invoice Contact : Sonny Puzzo

Date Signoff : 11/26/2025 1:04:41 PM

LAB ID	CLIENT ID	MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD	FAX DATE	DUE DATES
Q3725-04	STOCKPILE-SAMPLES	Solid	11/25/2025	12:00					
/OCCGMS NJ CleanGroup No Cleanup Test New 8260D 10 Bus. Days									

Relinquished By :

Date / Time :

Received By :

Date / Time :

Storage Area : VOA Refrigerator Room