



284 Sheffield Street, Mountainside, NJ 07092
(908) 789-8900 Fax: (908) 788-9222
www.chemtech.net

CHAIN OF CUSTODY RECORD

Alliance Project Number: AEC-2025-0013

COC Number:

23734

CLIENT INFORMATION

PROJECT INFORMATION

BILLING INFORMATION

COMPANY: Durham School Services

PROJECT NAME: CSC 6601 Castle Shannon

BILL TO: dede.golding@alliancetg.com

PO#

ADDRESS: 1 John C Dean Memorial Boulevard

PROJECT #: AEC-2025-0013

LOCATION: PA

ADDRESS:

CITY: Castle Shannon STATE: PA ZIP:

PROJECT MANAGER:

CITY:

STATE: ZIP:

ATTENTION: staci.bruce@alliancetg.com

E-MAIL:

ATTENTION:

PHONE:

PHONE:

FAX:

PHONE:

FAX:

DATA TURNAROUND INFORMATION

DATA DELIVERABLE INFORMATION

FAX: _____ DAYS*
HARD COPY: _____ DAYS*
EDD _____ DAYS*

* TO BE APPROVED BY ALLIANCE

STANDARD TURNAROUND TIME IS 10 BUSINESS DAYS

- ☐ RESULTS ONLY ☐ USEPA CLP
☐ RESULTS + QC ☐ New York State ASP "B"
☐ New Jersey REDUCED ☐ New York State ASP "A"
☐ New Jersey CLP ☐ Other _____
☐ EDD Format _____

ANALYSIS

Oil & Grease	TSS	Total Phosphorus	Nitrogen						
1	2	3	4	5	6	7	8	9	

PRESERVATIVES

COMMENTS

CHEMTECH SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# of Bottles										← Specify Preservatives A-HCl B-HNO3 C-H2SO4 D-NaOH E-ICE F-Other
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1.	SW-1	SW		X	11/25	9:45		1	1	1	1						
2.	SW-2	SW		X	11/25	10:00		1	1	1	1						
3.																	
4.																	
5.																	
6.																	
7.																	
8.																	
9.																	
10.																	

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

RELINQUISHED BY SAMPLER	DATE/TIME	RECEIVED BY	Conditions of bottles or coolers at receipt: ☐ Compliant ☐ Non Compliant ☐ Cooler Temp 3.2°C MeOH extraction requires an additional 4oz. Jar for percent solid Comments:
1. <u>FedEx</u>	<u>11-26-25</u>	1. <u>[Signature]</u>	
RELINQUISHED BY	DATE/TIME	RECEIVED BY	
2.		2.	
RELINQUISHED BY	DATE/TIME	RECEIVED FOR LAB BY	
3.		3.	

Page _____ of _____

SHIPPED VIA: CLIENT: ☐ Hand Delivered ☐ Overnight
ALLIANCE: ☐ Picked Up ☐ Overnight

Shipment Complete
☐ YES ☐ NO

WHITE - ALLIANCE COPY FOR RETURN TO CLIENT

YELLOW - ALLIANCE COPY

PINK - SAMPLER COPY