

CLIENT INFORMATION

CLIENT PROJECT INFORMATION

CLIENT BILLING INFORMATION

REPORT TO BE SENT TO:

COMPANY: Jacobs
ADDRESS: 412 Mt Kimple Ave Suite #100
CITY: Morris Plains STATE: NJ ZIP: 07960
ATTENTION: John Vinfante
PHONE: _____ FAX: _____

PROJECT NAME: STC PIZ
PROJECT NO.: D4633126 LOCATION: Princeton Jct.
PROJECT MANAGER: Mary Murphy
e-mail: Mary.Murphy@Jacobs.com
PHONE: _____ FAX: _____

BILL TO: Mary Murphy PO#: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
ATTENTION: _____ PHONE: _____

ANALYSIS

DATA TURNAROUND INFORMATION

DATA DELIVERABLE INFORMATION

FAX (RUSH) Standard TAT DAYS*
HARDCOPY (DATA PACKAGE): _____ DAYS*
EDD: _____ DAYS*

*TO BE APPROVED BY CHEMTECH

STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

☐ 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 _____

1. Site Specific VOCs (82 LOD - Low)
2. Trace VOCs (5-FALM) 1 SIM
3. 1,4 Dioxane (82 LOD - SIM)
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

PRESERVATIVES

COMMENTS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS
			COMP	GRAB	DATE	TIME		A/E	A/E	F							
1.	OWBR-05-135-120525	GW		X	12/5/25	1110	15	X		X							MS/MSD
2.	OWBR-05-135-120525-SIM	GW		X	12/5/25	1110	9		X								MS/MSD
3.	OW-01B-665-120525	GW		X	12/5/25	1115	3	X		X							
4.	OW-01B-665-120525-SIM	GW		X	12/5/25	1115	3		X								
5.	BR-05-465-120525	GW		X	12/5/25	1200	5	X		X							
6.	BR-05-465-120525-SIM	GW		X	12/5/25	1200	3		X								
7.	MW-16B-87.5-120525	GW		X	12/5/25	1435	5	X		X							
8.	MW-16B-87.5-120525-SIM	GW		X	12/5/25	1435	3		X								
9.	TBOI-120525	DI		X	12/5/25	0800	4	X	X								
10.																	

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

RELINQUISHED BY SAMPLER: 1. <u>[Signature]</u>	DATE/TIME: <u>12/5/25</u>	RECEIVED BY: <u>[Signature]</u>	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP <u>1.3 + 0 = 1.3</u> °C
RELINQUISHED BY SAMPLER: 2. _____	DATE/TIME: _____	RECEIVED BY: _____	Comments: <u>See work order for list of site specific VOCs</u> <u>IRAW #1</u>
RELINQUISHED BY SAMPLER: 3. _____	DATE/TIME: _____	RECEIVED BY: _____	