

Chain of Custody Record www.wtlmd.com

CLIENT NAME:					ANALYSIS REQUESTED										L A B S A M P L E I D	CONTAINER TYPE	PRESERVATION	
CLIENT ADDRESS/PHONE NUMBER/FAX NUMBER:					CONTAINER:					PRESERV. :						↓	P – PLASTIC	1 – HCl, 4°
					PRESERV. pH:					↓	A – AMBER GLASS	2 – H ₂ SO ₄ , 4°						
					# of						G – CLEAR GLASS	3 – HNO ₃ , 4°						
ATTENTION:		CC:			↓					↓						V – VOA VIAL	4 – NaOH, 4°	
REQUESTED COMPLETION DATE:		PO#:														S – STERILE	5 – NaOH/ZnAc, 4°	
PROJECT NAME/STATE:					↓					↓						O – OTHER	6 – Na ₂ S ₂ O ₃ , 4°	
PROJECT #:																7 – 4°	8 – none	
DATE	TIME	MATRIX CODE *	C O M P	G R A B	Collection Point	↓					↓					*MATRIX CODES		
			<input type="checkbox"/>	<input type="checkbox"/>												DW – DRINKING WATER	S – SOIL	
			<input type="checkbox"/>	<input type="checkbox"/>		WW – WASTE WATER	SL – SLUDGE											
			<input type="checkbox"/>	<input type="checkbox"/>		GW – GROUND WATER	SD – SOLID											
			<input type="checkbox"/>	<input type="checkbox"/>		ST – STORM WATER	A – AIR											
			<input type="checkbox"/>	<input type="checkbox"/>		SW – SURFACE WATER	L – LIQUID											
			<input type="checkbox"/>	<input type="checkbox"/>			P – PRODUCT											
					↓					↓					REMARKS/ADDITIONAL INFORMATION			
SAMPLED BY:			DATE/TIME: See Above		RELINQUISHED BY:			DATE/TIME:			↓				FOR LAB USE ONLY			
RECEIVED BY:			DATE/TIME:		RELINQUISHED BY:			DATE/TIME:							Comments: Lab#:			
RECEIVED BY LAB:			DATE/TIME:		SAMPLE SHIPPED VIA: UPS FED-EX COURIER			CLIENT/OTHER			FIELD SERVICES		In-house location:					
pH upon lab arrival:		SU	Ice: Yes or No		Temperature:C			Custody Seal: Intact Broken/Missing		COOLER #								

Please use Black Ink to complete form