Client:

Project:

Sampler:

Phone:

Email(s):

Project Manager:

RUSH?

☐ 1d

☐ 3d

Lab Use Only
Lab WO#
P
Job Number

Page ___ of ___

Sample ID	Sample Date	Sample Time	Matrix	Containers QTY - Vol/TYPE/Preservative	GRO/DRO by 8015	BTEX by 8021	TPH by 418.1	Chloride by 300.0						lab Only: Lab Number	lab Only: Correct Cont/Prsrv (s) Y/N

Relinquished by: (Signature)	Date	Time	Received by: (Signature)	Date	Time
Relinquished by: (Signature)	Date	Time	Received by: (Signature)	Date	Time

Lab Use Only

**Received on Ice Y / N

T1_____ T2_____ T3_____

AVG Temp °C_____

Sample Matrix: **S** - Soil, **Sd** - Solid, **Sg** - Sludge, **A** - Aqueous, **O** - Other _____

Container Type: **g** - glass, **p** - poly/plastic, **ag** - amber glass, v - VOA

**Samples requiring thermal preservation must be received on ice the day they are sampled or received packed in ice at an avg temp above 0 but less than 6 °C on subsequent days.

☐ Sample(s) dropped off after hours to a secure drop off area.

Chain of Custody

Notes/Billing info:

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