



## WHOLE EFFLUENT TOXICITY CHAIN OF CUSTODY RECORD

**SHADED AREA FOR LAB USE ONLY**

Client/Company Ordering Test:		Location/Address:		Other Sample Related Remarks:					
Sampler (Signature):		PWS ID#	PO#						
FES Lab #	Collection		Sampling Point/Description	Grab/ Comp	Temp.	Flow (MGD)	Cont.	Vol.	Rainfall (inches)
	Date	Time (24 hr.) Composite Run Date/Time (xx:xx – xx:xx)							

Relinquished By:	Received By:	Date	Time (24 hr)	<b>Shipping Conditions:</b> <input type="checkbox"/> Iced <input type="checkbox"/> Ambient <b>Container Temperature:</b> _____ <b>Holding times acceptable?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>pH's checked?</b> <input type="checkbox"/> <b>Data entered by:</b> _____ <b>Method of Delivery:</b> <input type="checkbox"/> FES <input type="checkbox"/> Client <input type="checkbox"/> UPS/Fed Ex <input type="checkbox"/> Other
Relinquished By:	Received By:	Date	Time (24 hr)	
Relinquished By:	Received For Laboratory By:	Date	Time (24 hr)	