

REGULATORY: YES NO

CHAIN OF CUSTODY RECORD

TURNAROUND TIME: _____ P1
____ STANDARD RUSH _____ P2

CLIENT: _____
ADDRESS: _____
PHONE: _____ FAX: _____

SAMPLE ANALYSIS REQUESTED											
Preservative											
TYPE: Grab / Composite	TOTAL # OF CONTAINERS										Container Type
											PROGRAM AREA

USE CODES TO INDICATE IF SAMPLE WAS FILTERED OR PRESERVED: A = HNO₃
B = HCL D = H₂SO₄ F = FILTRATION
C = NAOH E = NA₂S₂O₃ G = ZINCACETATE

PROGRAM AREA: D = DRINKING WATER
G = GROUNDWATER S = SOLID SL = SLUDGE
W = WASTEWATER O=OTHER

Container Type: P=Plastic/G=Glass

SHADED AREAS FOR LAB USE ONLY

SAMPLE ID	DATE	TIME	INITIAL
	START:		
	FINISH:		
	START:		
	FINISH:		
	START:		
	FINISH:		
	START:		
	FINISH:		

Fill in the Number of Containers for EACH Test

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NOTES	LAB ID

SAMPLER SIGNATURE _____

COMPOSITE TEMP _____ °C
() TIME () FLOW PROPORTIONAL
INTERVAL BETWN SAMPLES _____
SAMPLE VOLUME _____ mls
OF SAMPLES _____

METER NUMBER
TRC _____
DPD LOT # _____
DO _____ ph _____

FLOW INFO

ICE: YES NO ICE PACK
RECEIPT TEMP: _____ °C

Relinquished by: _____	Date: _____	Time: _____	Relinquished by: _____	Date: _____	Time: _____	Relinquished by: _____	Date: _____	Time: _____
Received by: _____	Date: _____	Time: _____	Received by: _____	Date: _____	Time: _____	Received by: _____	Date: _____	Time: _____

Comments: _____