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## CHAIN OF CUSTODY

Page \_\_\_\_ of \_\_\_\_

Bill to / Report to (if different) \_\_\_\_\_

Sampling Site Address (if different) \_\_\_\_\_

P.O. NO \_\_\_\_\_

QC Contact \_\_\_\_\_

Lab LIMS No: \_\_\_\_\_

### MATRIX CODES

### LAB USE ONLY

# \_\_\_\_ Ascorbic / HCl Vials # \_\_\_\_ HCl Vials

# \_\_\_\_ Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub> \_\_\_\_\_

# \_\_\_\_ NaOH / Zn Acetate - pH \_\_\_\_\_

# \_\_\_\_ HNO<sub>3</sub> - pH \_\_\_\_\_

# \_\_\_\_ H<sub>2</sub>SO<sub>4</sub> - pH \_\_\_\_\_

# \_\_\_\_ Unpreserved

# \_\_\_\_ HCl - pH \_\_\_\_\_

# \_\_\_\_ Temp control \_\_\_\_ ID # \_\_\_\_\_

- DW: DRINKING WATER
- GW: GROUND WATER
- WW: WASTEWATER
- SO: SOIL
- SL: SLUDGE
- OIL: OIL
- SOL: NON SOIL SOLID
- MI: MISCELLANEOUS
- X: OTHER

### ANALYSIS REQUESTED

Field pH, Temp (°C or °F),  
DO, Cl<sub>2</sub> S. Cond., etc.

LAB USE ONLY	PROJECT	Collection		G R A B	C O M P	Matrix Code	Number of Containers												
	FIELD ID	Date (mm/dd/yy)	Military Time (hh:mm)				Total	H <sub>2</sub> S O <sub>4</sub>	H C I	V I A L S	H N O <sub>3</sub>	N a O H	Z n A C	U N P R E	B a c t				

SAMPLED BY: (Name/Company)	Verbal/fax due (mm/dd/yy):	Report Format:    Standard    Forms	Field Parameter(s) Analyzed By:
	Hardcopy due (mm/dd/yy):	Standard + QC    NJ Reduced    CD	Date/Time (dd/mm/yy hh:mm)
	PLEASE CALL FOR PRICING AND AVAILABILITY ON RUSH (< 14-21 day) TURNAROUND AND ON ALL BUT STANDARD FORMAT		

**SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW. USE FULL LEGAL SIGNATURE, DATE AND MILITARY TIME (24 HOUR CLOCK, I.E. 8AM IS 0800, 4 PM IS 1600)**

RELINQUISHED BY SAMPLER	DATE (dd/mm/yy)	TIME (hh:mm)	RECEIVED BY	DATE	TIME	DELIVERY METHOD: <input type="checkbox"/> QC COURIER <input type="checkbox"/> CLIENT <input type="checkbox"/> UPS <input type="checkbox"/> FED EX <input type="checkbox"/> OTHER _____	Custody Seal Number
RELINQUISHED BY	DATE	TIME	RECEIVED BY	DATE	TIME		
RELINQUISHED BY	DATE	TIME	RECEIVED BY	DATE	TIME	COMMENTS:	
RELINQUISHED BY	DATE	TIME	RECEIVED BY	DATE	TIME		