QC Laboratories
1205 Industrial Blvd.
Southampton, PA 18966-0514
Phone: 215-355-3900
Fax: 215-355-7231

CHAIN OF CUSTODY

Page _____ of _____

Lab LIMS No:

Client/Acct. No.

Address

City/State/Zip

Phone/Fax

Client Contact

Bill to/Report to: (if different)

Sampling Site Address: (if different)

P.O. No.

QC Contact

LAB USE ONLY:

____ Ascorbic/HCl Vials # ____ HCl Vials
____ $Na_2S_2O_3$ _____
____ Na OH/Zn acetate pH _____
____ HNO_3 pH _____
____ H_2SO_4 pH _____
____ NaOH pH _____
____ Unpreserved
____ Hcl pH
____ Temp control _____ ID# _____

MATRIX CODES

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

PROJECT	Collection		GRAB	COMP	Matrix Code	Number of Containers									ANALYSIS REQUESTED	Field pH, Temp (C or F), DO, Cl_2, S. Cond. etc.
FIELD ID	Date	Military Time				Total	H_2SO_4	HCl	Vials	HNO_3	NaOH	ZnAc	Unpre	Bact		

SAMPLED BY: (Name/Company)

Verbal/fax data due: _____/_____/_____

Hardcopy due: _____/_____/_____

Report Format: ☐ Standard ☐ Forms ☐ Standard +.QC ☐ NJ Reduced ☐ Disk

Please call for pricing and availability on rush (<14-21 day) turnaround and on all but standard format.

Field Parameters Analyzed By:

Sig:

Date/Time:

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	TIME	RECEIVED BY	DATE	TIME
1			1		
RELINQUISHED BY 2	DATE	TIME	RECEIVED BY 2	DATE	TIME
RELINQUISHED BY 3	DATE	TIME	RECEIVED BY 3	DATE	TIME
RELINQUISHED BY 4	DATE	TIME	RECEIVED BY 4	DATE	TIME
RELINQUISHED BY 5	DATE	TIME	RECEIVED BY 5	DATE	TIME

DELIVERY METHOD: ☐ QC COURIER ☐ CLIENT ☐ UPS ☐ FEDEX ☐ OTHER_____

Custody Seal Number

COMMENTS:

Hazardous: yes / no

For example to aid completion, see reverse side.

FINAL REPORT

QC Laboratories
1205 Industrial Blvd.
Southampton, PA 18966-0514
Phone: 215-355-3900
Fax: 215-355-7231

CHAIN OF CUSTODY

Page 1 of 1

Lab LIMS No:

LAB USE ONLY:

MATRIX CODES

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

Client/Acct. No. John Smith Industries
Address 123 Main Street
Office 100
City/State/Zip Anytown, PA 12345-6789
Phone/Fax 215-555-1223/555-4567
Client Contact John Smith

Bill to/Report to: (if different) Same, Att: Accounting Department
Sampling Site Address: (if different) Smith Landfill, Smithtown NJ 08000
P.O. No. JS 12345
QC Contact Mary Brown

PROJECT Smith Landfill

FIELD ID	Collection Date	Collection Military Time	GRAB	COMP	Matrix Code	Number of Containers Total	H_2SO_4	HCl	Vials	HNO_3	NaOH	ZnAc	Unpre	Bact	ANALYSIS REQUESTED	Field pH, Temp (C or F), DO, Cl_2, S. Cond. etc.
MW #1	1/2/97	1400	✔		GW	4			3					1	624 + LS, Total Coliform	pH 7.0 10.2 C°
MW #2	1/2/97	1430	✔		GW	5	1			1	1		2		Cd, Zn, PCBs, CN, O & G, TDS	pH 6.5 9.5 C°
Soil Pile	1/2/97	1500		✔	SO	2							2		8260 + LS, 8270 + LS, Flashpoint, TS	

EXAMPLE

SAMPLED BY: (Name/Company)
David Brown
Smith Industries

Verbal/fax data due: 1 / 16 / 97
Hardcopy due: 1 / 22 / 97

Report Format: ☑ Standard ☐ Forms ☐ Standard + QC ☐ NJ Reduced ☐ Disk

Please call for pricing and availability on rush (<14-21 day) turnaround and on all but standard format.

Field Parameters Analyzed By:
Sig: David Brown
Date/Time: 1/2/97, 1415

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	TIME	RECEIVED BY	DATE	TIME
1 David Brown	1/2/97	1600	1 Mary Brown/QC	1/2/97	1600
RELINQUISHED BY 2	DATE	TIME	RECEIVED BY 2	DATE	TIME
RELINQUISHED BY 3	DATE	TIME	RECEIVED BY 3	DATE	TIME
RELINQUISHED BY 4	DATE	TIME	RECEIVED BY 4	DATE	TIME
RELINQUISHED BY 5	DATE	TIME	RECEIVED BY 5	DATE	TIME

DELIVERY METHOD: ☐ QC COURIER ☑ CLIENT ☐ UPS ☐ FEDEX ☐ OTHER

Custody Seal Number

COMMENTS: