## Element One, Inc. 6319-D Carolina Beach Rd. Wilmington, NC 28412

## **CHAIN OF CUSTODY**

## **Sample Submission Form Client Information**

Report to:

Delivery

Lab ID# Page of Phone 910-793-0128 / FAX 792-6853 email e1lab@e1lab.com

Collected by:

Analyses Requested

Contact:	PO#:			Delivery	/	Report to:			Analyses Requested								Collected by:						
Company				ue Date:												SS	Sig	natu	re:		-		
Address						Phone										Glass							
				Normal		FAX								٦c	Prir	nted:							
				5 day *		email										Plastic (							
Project ID:				3 day *		Cell												Pres	serve	ed in	Field	t	
Billing information if different:			☐ 2 day *			* Rush work needs prior lab approval. Additional										Гуре		Pres	serve	ed in	Lab		
			☐1 day *			charges will apply.										er J		Rec	eive	d on	Ice		
							Compliance								htair	Container Type,		U	$\prod$				
			e,	Matrix <sup>2</sup>	# Cntrs	e orine	Non-Complian	on-Compliance								Cor	a)	Ascorbic	တို	౼	Ŏ O	ဂိ	
Sample Location / ID#	Date	Time	Type1	Mat	# C	Free Chlorine	Remarks										None	Asc	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	NaOH	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>	I
																		<u> </u>					
1) Type: Composite(C) or Gra	b ( <b>G</b> ) 2) Matr	ix: Wastew	ater(	<b>WW</b> ), D	rinkir	ng wate	r( <b>DW</b> ), Groundwate	er( <b>G</b> \	<b>W</b> ), S	Soil/S	Solid(	<b>(SS</b> )	, Air	Test	ing(	AT),	Othe	er( <b>O</b>	T)				
Relinquished by:	Date:	Time:	Re	eceived by	y:		Date:	Ti	me:		Additional instructions												
Relinquished by:	Date:	Time:	Re	eceived by	y:		Date:	Ti	me:		Lab notes:												
Relinquished by:	Date:	Time:	Re	eceived fo	r Lab	b by:	Date:	Ti	ime:		pH at receipt:			Гетр	emp. at receipt:			Other:					
Element One, Inc. Form 025 - Ro	evision 2		1				I				1												