BASIC LABORATORY CHAIN OF CUSTODY RECORD

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LAB #:

CLIENT NAME:	PROJECT NAME:	PROJECT #:	SAMPLE MATRIX:
MAILING ADDRESS:	REPORT DUE DATE:	STATE FORMS? ☐	# OF SAMPLES:
	TURN AROUND TIME: STD ☐ RUSH ☐		PAGE_____OF_____

PROJECT MANAGER:		PO#
PHONE:	EMAIL:	REG:
FAX:	INVOICE TO:	SYSTEM#:
SPECIAL MAIL ☐ E-MAIL ☐ FAX ☐ EDT ☐		GLOBAL ID #:

SAMPLE DATE	SAMPLE TIME	WATER	COMP	SOIL	SAMPLE LOCATION / IDENTIFICATION	# OF BOTTLES	SAMPLE TYPE 1, 2, 3, 4, or 5*	CHLORINE RESIDUAL	ANALYSIS REQUESTED									LAB ID	QC = 1 2 3 4 REMARKS

PRESERVED WITH: HNO_3 ☐ H_2SO_4 ☐ NaOH ☐ ZnAce/NaOH ☐ HCL ☐ NaThio ☐ OTHER_____

SAMPLED BY (PRINT):	SAMPLE DATE/TIME:	RELINQUISHED BY:	DATE/TIME:
RECEIVED BY:	DATE/TIME:	RELINQUISHED BY:	DATE/TIME:
RECEIVED BY: (SAMPLES UNVERIFIED)	DATE/TIME:	RELINQUISHED BY:	DATE/TIME:
LOGGED IN AND VERIFIED BY:	DATE/TIME:	SAMPLES SHIPPED VIA: ○UPS ○FEDEX ○POST ○BUS ○OTHER_____	

*1 = ROUTINE, 2 = REPEAT, 3 = REPLACEMENT, 4 = SPECIAL, 5 = RAW