Chain of Custody Record

AR Lab Job

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AR LABORATORIES, Inc.

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	office@arlaboratories.com								PI	eas	e Ci	rcle	e A	naly	/se	s Re	qu	est	ed		\	
Project No: Project Name: Project Manager: Phone:				Fax:								524.2	BTEX/Oxygenates Only		Pest/PCB		RCRA, PP				Turn-Around Time 24 Hr. RUSH* 48 Hr. RUSH* Normal TAT	
Client Name			Address: (Report and Billing)				Diesel, Fuel Screen,	Gas only	BTEX/MtBE Only	418.1 (TRPH), 413.2, 1664		GC or GCMS Volatiles by 5035*	6	MtBE Conf. Only, E	8270C, 625	Pesticides, PCBs,		Metals: Title 22 (CAM), RC	TSS, Conductivity	Hex Cr		*Requires PRIOR approval, additional charges apply Requested due date:
Centrum ID (Lab use only)	Sample ID (As it should appear on report)	Date sampled	Time sampled	Sample matrix	Site location	Containers: # and type	8015M: Die	8015M: Ga	8021B: BTI	418.1 (TRPH		GC or GCM	GCMS: 826	GCMS: MtE	GCMS: 827	8080: Pest		Metals: Tit	pH, TDS,	Flashpoint, Hex Cr	,	Remarks/Special Instructions
1) Relinquished by: (Sampler's Signature) Date: Time:				3) Relinquished by:		Date	<u> </u> ::	Time	e:	To be completed by Laboratory personnel: Sample Disposal												
2) Received by: Date: Time:				4) Received by:):	Time:		Samples chilled?									d	☐ Client will pick up☐ Return to client		
The delivery of samples and the signature on this chain of custody form constitutes authorization to perform the analyses specified above under the Terms and Conditions set forth on the back hereof.					5) Relinquished by: 6) Received for Laboratory by:			e: Time:			All sample containers intact? ☐ Yes ☐ No ☐ Courier ☐ UPS/Fed Ex ☐ Hand carried										☐ Lab disposal	
Laboratory	Notes:				1		<u> </u>															Sample Locator No.