

**Chain-of-Custody & Analysis Request**

Client / Project Name:					* DEFINITIONS: <b>DW</b> - Drinking Water <b>CM</b> - Custody Maintained <b>NP</b> - Non-Potable Water <b>CTU</b> - Custody Transfer Unbroken <b>S</b> - Solid			<b>LAB USE ONLY</b> (initials _____)				
Field Sample ID	Start Date / Time	End Date / Time	Composite Type	Sample Matrix*	Container Volume	Container Type	Sample Pres. +	Analysis Requested	Cooler ID	Bottle pH	Sub-contract	Lab ID #

By relinquishing the above samples to Aqua-Tech, the client agrees to the following terms. Samples will be analyzed by a method that is within Aqua-Tech Laboratories' NELAC fields of accreditation. Analytes requiring a certified method that is not within Aqua-Tech's fields of accreditation will be subcontracted to a NELAC certified lab that is certified for that method. Clients will be notified of the subcontract lab's details. Other analytes not requiring accreditation will be analyzed by a compendial method. If a specific method is required, the client will note the method in the "Analysis Requested" column. The client approves all method modifications documented by Aqua-Tech or the subcontract lab. A current list of Aqua-Tech's NELAC fields of accreditation and other methods are available on request.

Relinquished by: (print & sign) <input type="checkbox"/> Client <input type="checkbox"/> ATL Field <input type="checkbox"/> Sampler				Sample Info "X" all that apply <input type="checkbox"/> Iced <input type="checkbox"/> Chilled/Refrig <input type="checkbox"/> Cust. Sealed <input type="checkbox"/> Not Chilled	Rec'd by: (print & sign) <input type="checkbox"/> Client <input type="checkbox"/> ATL Field				Sample Info "X" all that apply <input type="checkbox"/> Rec'd Chilled <input type="checkbox"/> Cond Good <input type="checkbox"/> CTU * <input type="checkbox"/> Iced in Transit
	Date	Time				Date	Time		
Relinquished by: (print & sign) <input type="checkbox"/> Client <input type="checkbox"/> ATL Field				<input type="checkbox"/> Iced <input type="checkbox"/> Chilled/Refrig <input type="checkbox"/> CM * <input type="checkbox"/> Not Chilled	Rec'd by: (print & sign) <input type="checkbox"/> Client <input type="checkbox"/> ATL Field				<input type="checkbox"/> Rec'd Chilled <input type="checkbox"/> Cond Good <input type="checkbox"/> CTU * <input type="checkbox"/> Iced in Transit
	Date	Time				Date	Time		
Relinquished by: (print & sign) <input type="checkbox"/> Client <input type="checkbox"/> ATL Field arrival in Lab				<input type="checkbox"/> Iced <input type="checkbox"/> Chilled/Refrig <input type="checkbox"/> CM * <input type="checkbox"/> Not Chilled	Rec'd by: (print & sign) <input type="checkbox"/> Received in Lab				<input type="checkbox"/> Rec'd Iced <input type="checkbox"/> Not Rec'd Iced <input type="checkbox"/> CTU * <input type="checkbox"/> Cond Good
	Date	Time				Date	Time		

Field Sample ID	Time	pH	D.O.	Cl <sub>2</sub>	Flow	Client Address and Phone # :	Client Comments:

+ Sample Pres.	pH Paper ID#:	1	2 = H <sub>2</sub> SO <sub>4</sub>	3 = HCl	4 = HNO <sub>3</sub>	Laboratory Comments:
	5 = Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	≤ 6 °C (not frozen)	6 = NaOH	7 =	8 =	

(Line below documents condition at receipt in Laboratory by Sample Custodian. Lab location noted by check box at top of C-O-C.)

Cooler ID:	Temp °C: /	CT	Therm ID:	Cooler ID:	Temp °C: /	CT	Therm ID:
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