

PSC Analytical Services

Sample Receipt Checklist

Client Name **ATC ASSOCIATES**

Date and Time Receive **2/12/2002 9 45:00 AM**

Work Order Numbe **R02020388**

Received by **JAD**

Checklist completed b BMT 2/12/02
Signature Date

Reviewed by [Signature] 2/12/02
Initials Date

Matrix

Carrier name FedEx

Shipping container/cooler in good condition?	Yes ☒	No ☐	Not Presen ☐
Custody seals intact on shipping container/cooler?	Yes ☐	No ☐	Not Presen ☒
Custody seals intact on sample bottles?	Yes ☐	No ☐	Not Presen ☒
Chain of custody present?	Yes ☒	No ☐	
Chain of custody signed when relinquished and received?	Yes ☒	No ☐	
Chain of custody agrees with sample labels?	Yes ☒	No ☐	
Samples in proper container/bottle?	Yes ☒	No ☐	
Sample containers intact?	Yes ☒	No ☐	
Sufficient sample volume for indicated test?	Yes ☒	No ☐	
All samples received within holding time?	Yes ☒	No ☐	
Container/Temp Blank temperature in compliance?	Yes ☒	No ☐	
Water - VOA vials have zero headspace?	No VOA vials submitted ☒	Yes ☐	No ☐
Water - pH acceptable upon receipt?	Yes ☒	No ☐	

Adjusted? _____ Checked b _____

Any No and/or NA (not applicable) response must be detailed in the comments section b

Client contacted _____ Date contacted _____ Person contacted _____

Contacted by _____ Regarding _____

Comments _____

Corrective Action _____