



4418 Pottsville Pike
Reading, PA 19605
phone: (610) 921-8833
fax: (610) 921-9667 or 921-8407

CHAIN OF CUSTODY

PSC Work Order # <u>R02060249</u>
Page <u>1</u> of <u>1</u>

Report Results To:	PO #	Quote #
	Name	<u>James Cahn</u>
	Company	<u>ATC Associates Inc</u>
	Mailing Address	<u>104 E 25th Street 10th floor</u>
	City	<u>New York State NY ZIP 10010</u>
Submit Invoice To:	Telephone #	<u>212.353.8280</u> Fax # <u>212.353.8306</u>
	Name	
	Company	<u>SMC</u>
	Mailing Address	
	City	State ZIP
	Telephone #	Fax #
	Credit Card Info (include exp. date)	

JOB ID: 19125-0279

ANALYSIS REQUESTED

Use attachments if necessary.
Please specify method requirements.

Preservatives Key:

A = Ascorbic Acid
C = HCl N2 = Na2SO3
H = HNO3 S = H2SO4
I = Ice Z = ZnAcetate
N = NaOH X = None

O = Other: _____

Sampled by: Wojcik & TCH Sampling Location (Specify State):
Due Date: _____ (Rush TAT requires Lab approval)

REPORTING REQUIREMENTS (Circle all that apply)

Full Data Package Reduced Deliverables Package Electronic Data Deliverables

UST NPDES MIPP RCRA Stormwater DEP (PWS # _____)

Preservatives (See above Key; list all that apply)

Type (P=Plastic, G=Glass, A=Air)

Container Volume (Liter, etc)

Number of Containers

Main Ent. Lobby

10th floor Hq 11 Center

West playground

Roof

ITEM #	SAMPLE DESCRIPTION (ID must match container labels)	Final Air Volume (L or min)	Matrix Type	Sampling Info	
				Date	Time
1	ATC-0528-234M-M1	1200	AIR	5/28/02	600 ✓
2	ATC-0528-234M-M2	1200			600 ✓
3	ATC-0528-234M-M3	1200			600 ✓
4	ATC-0528-234M-M4	1200			600 ✓
5	ATC-0528-234M-M5	Blank			Blank ✓
6	ATC-0528-234M-M6	Blank			Blank ✓
7					
8					
9					
10					

(1) Relinquished by: <u>Wojcik</u>	Date	Time	(2) Received by:	Date	Time	(3) Relinquished by:	Date	Time
(4) Received by:	Date	Time	(5) Relinquished by:	Date	Time	(6) Received at Lab: <u>C. K.</u>	Date <u>6/1/02</u>	Time <u>5:30</u>

Method of Delivery: UPS FED-EX PAS Courier Client US Mail Other _____