



PSC Analytical Services

4418 Pottsville Pike

Reading, PA 19605

phone: (610) 921-8833

fax: (610) 921-9667 or 921-8407

CHAIN OF CUSTODY

PSC Work Order #

202081005

Page 1 of 1

JOB ID: 19125-0343

Report
Results
To:

PO # _____ Quote # _____
 Name James Cohn
 Company ATC Associates Inc
 Mailing Address 104 E 25th Street 10th FL.
 City New York State NY ZIP 10010
 Telephone # 212.353.8280 Fax # 212.353.8306

Submit
Invoice
To:

Name _____
 Company SAME
 Mailing Address _____
 City _____ State _____ ZIP _____
 Telephone # _____ Fax # _____
 Credit Card Info (include exp. date) _____

ANALYSIS REQUESTED

Use attachments if necessary.

Please specify method requirements.

Preservatives Key:

A = Ascorbic Acid

C = HCl

N2 = Na2S2O3

H = HNO3

S = H2SO4

I = Ice

Z = ZnAcetate

N = NaOH

X = None

O = Other: _____

Sampled by: Wagoh in Jimmy Sampling Location (Specify State): NY
 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 # _____)

ITEM #	SAMPLE DESCRIPTION (ID must match container labels)	Final Air Volume <u>200cm³</u>	Matrix Type	Sampling Info	
				Date	Time
1	ATC-0829-126M-PCB ₁	100 cm ³	wipe	8/29/02	✓
2	ATC-0829-126M-PCB ₂	100 cm ³	wipe	↓	✓
3	ATC-0829-126M-PCB ₃	100 cm ³	wipe	↓	✓
4					
5					
6					
7					
8					
9					
10					

Preservatives (See above Key; list all that apply)

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

Container Volume (Liter, etc)

Number of Containers

Lobby Main Ent.

3rd floor Hall by 317

4th floor Hall by 435

(1) Relinquished by:	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:	Date	Time
						<u>E. L. Muel</u>	<u>8/30/02</u>	<u>0930</u>

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

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610-921-9667

PSC

Sep 05 02 04:28p

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