



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 #

R00030266

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Report Results To:	PO #	Quote #	
	Name	James Cahn	
	Company	ATC Associates Inc.	
	Mailing Address	104 E 25th Street 10th floor	
	City	State	ZIP
Submit Invoice To:	Telephone #	212-353-8280	Fax # 212-353-8306
	Name		
	Company	SAME	
	Mailing Address		
	City	State	ZIP
Telephone #		Fax #	
Credit Card Info (include exp. date)			
Sampled by: WAGDI A. Tenzin		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 (L ~~1000~~)	Matrix Type
			Sampling Info
			Date Time
1	ATC-0304-15M-M1	1200	air 3/4/02 600 ✓
2	ATC-0304-15M-M2	1200	air 1 600 ✓
3	ATC-0304-15M-M3	1200	air 1 600 ✓
4	ATC-0304-15M-M4	Blank	air 1 Blank ✓
5			
6			
7			
8			
9			
10			
(1) Relinquished by: WAT		Date: 3/5/02	Time:
(4) Received by:		Date:	Time:
(2) Received by: [Signature]		Date: 3/6/02	Time: 1430
(5) Relinquished by:		Date:	Time:
(3) Relinquished by:		Date:	Time:
(6) Received at Lab:		Date:	Time:

JOB ID: 10125 - 0289

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: _____

Preservatives (See above Key; list all that apply)

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

Container Volume (Liter, etc)

Number of Containers

plaza

Main Lobby

Roof

Blank

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

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