

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

CHAIN OF CUSTODY

Page 1 of 1

Report Results To:	PO #	Quote #	JOB ID: 19125-0279											
	Name	James Cohn												
	Company	ATC Associates Inc.												
	Mailing Address	104 E 25th Street 10th floor												
Submit Invoice To:	City	New York	State	NY	ZIP	10010								
	Telephone #	212-353-8280				Fax #	212-353-8306							
	Name	SAME												
	Company	SAME												
Due Date:	Mailing Address	SAME												
	City	State				ZIP								
	Telephone #	Fax #												
	Credit Card Info (include exp. date)													
Sampled by: Wayne A. Tenen		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								
US		NPDES		MIPP		RCRA		Stormwater		DEP (PWS #)				
ITEM #	SAMPLE DESCRIPTION (ID must match container labels)	Final Air Volume (L. minimum)	Matrix Type	Sampling Info										
				Date	Time									
1	ATC-0326-234M-Hg1	120	AIR	3/26/02	600	Main Lobby								
2	ATC-0326-234M-Hg2	120			600									1st floor Hall Center
3	ATC-0326-234M-Hg3	120			600	West playground								
4	ATC-0326-234M-Hg4	120			600									Roof
5	ATC-0326-232M-Hg5	Blank			Blank	Blank								
6														
7														
8														
9														
10														
(1) Relinquished by: WAT		Date: 3/27/02	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: 3/31/02	Time: 1030			

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