



CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A		Section B		Section C																	
Required Client Information: Company: ATC Associates Inc. Address: 104 E 25th Street 10th floor New York, NY 10010 Phone: 212-353-8220 Fax: 212-353-8306		Required Client Information: Report To: James Cohn Copy To: Invoice To: P.O. Project Name: PS 234M Project Number: 19125-0279		Page: 1 of 1 Client Information (Check quote/contract): Requested Due Date: TAT: * Turn around times less than 14 days subject to laboratory and contractual obligations and may result in a Rush Turnaround Surcharge. Turn Around Time (TAT) in calendar days.																	
Section D		Section E		Section F																	
Required Client Information: SAMPLE ID One character per box. (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE		Valid Matrix Codes <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>MATRIX</th> <th>CODE</th> </tr> <tr><td>WATER</td><td>WT</td></tr> <tr><td>SOIL</td><td>SL</td></tr> <tr><td>OIL</td><td>OL</td></tr> <tr><td>WIPE</td><td>WP</td></tr> <tr><td>AIR</td><td>AR</td></tr> <tr><td>TISSUE</td><td>TS</td></tr> <tr><td>OTHER</td><td>OT</td></tr> </table>		MATRIX	CODE	WATER	WT	SOIL	SL	OIL	OL	WIPE	WP	AIR	AR	TISSUE	TS	OTHER	OT	DATE COLLECTED mm / dd / yy TIME COLLECTED hh:mm:ss area	
MATRIX	CODE																				
WATER	WT																				
SOIL	SL																				
OIL	OL																				
WIPE	WP																				
AIR	AR																				
TISSUE	TS																				
OTHER	OT																				
ITEM #		MATRIX CODE		Preservatives # Containers Unpreserved H ₂ SO ₄ HNO ₃ HCl NaOH Na ₂ S ₂ O ₃ Methanol Other																	
SHIPMENT METHOD Fedex		AIRBILL NO. SHIPPING DATE NO. OF COOLERS		RELINQUISHED BY / AFFILIATION DATE TIME																	
SAMPLE CONDITION Temp in °C: 15 Received on Ice: Y/N Sealed Cooler: Y/N Samples Intact: Y/N		SAMPLE NOTES <p><i>pls use the same Blank of 150m with these samples</i></p>		SAMPLER NAME AND SIGNATURE PRINT Name of SAMPLER: Nigel SIGNATURE of SAMPLER: <i>[Signature]</i> DATE Signed (MM / DD / YY): 4/16/02																	

625144

To Be Completed by Pace Analytical and Client

Quote Reference:

Project Manager:

Project #:

Profile #:

Requested Analysis:

Remarks / Lab ID

103481313

103481321

4/23/02 9:30

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER:

DATE Signed (MM / DD / YY)

4/16/02

SEE FOR DEL INS TIO

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