

Expert Chemical Analysis

10366 Roselle St. Suite C – San Diego, CA 92121

PHONE: (858)535-9979

ORDER INFORMATION/CHAIN OF CUSTODY FORM



<p>CUSTOMER INFORMATION</p> <p>COMPANY: _____ Date: _____</p> <p>CONTACT: _____ Email: _____</p> <p>ADDRESS: _____ Phone: _____</p> <p>_____</p> <p>Safety Issues/Special Instructions: _____</p>	<p>REPORT/BILLING INFORMATION</p> <p>P.O.# _____</p> <p>Report results by <input type="checkbox"/> mail <input type="checkbox"/> e-mail</p> <p><input type="checkbox"/> telephone <input type="checkbox"/> customer pick up</p> <p><u>Special Handling</u></p> <p><input type="checkbox"/> 1-2 day rush (100% surcharge)</p> <p><input type="checkbox"/> 3-6 day rush (50% surcharge)</p> <p><input type="checkbox"/> 7-10 business days (standard)</p> <p><input type="checkbox"/> Other</p>
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SAMPLE INFORMATION. Date sampled: _____ Time Sampled: _____ Sampler: _____

Sample type: Solid Liquid Gas Organic Non-Organic Metals Solid Waste Waste Water Sludge Soil Other Matrix

Storage/Preservation Requirements: 15-25°C (Room Temperature) 2-8°C ≤-20°C 80°C pH<2.0 pH>9.0 Other:

ANALYSIS		<i>Italicized areas are for ECA use only</i>						
CUSTOMER SAMPLE ID	ANALYSIS REQUESTED	<i>ECA sample #</i>	<i>Storage #</i>	<i>Notebook reference</i>	<i>SOP No.</i>	<i>Analysis Date</i>	<i>Specs</i>	<i>Analysis Results</i>

CUSTODY:

1st Relinquished By _____ Date/Time: _____ 2nd Received By: _____ Date/Time: _____

1st Received By: _____ Date/Time: _____ 3rd Received By: _____ Date/Time: _____

As Received Condition/Note: _____