Chain of Custody Record & Laboratory Services Agreement

3600 Fremont Ave N.
Seattle, WA 98103
Tel: 206-352-3790

Date: Page: of:

Laboratory Project No (internal):

Project Name:

Special Remarks:

Client:

Project No:

Address:

Collected by:

City, State, Zip:

Location:

Telephone:

Report To (PM):

Disposal: Samples will be disposed in 30 days unless otherwise requested.
☐ Retain volume (specify above) ☐ Return to client

Email(s):

Sample Name	Sample Date	Sample Time	Sample Type (Matrix)*	# of Cont.	VOCs (EPA 8260 / 624)	BTEX	Gasoline Range Organics (GX)	Hydrocarbon Identification (HCID)	Diesel/Heavy Oil Range Organics (DX)	SVOCs (EPA 8270 / 625)	PAHs (EPA 8270 - SIM)	PCBs (EPA 8082 / 608)	Metals** (EPA 6020 / 200.8)	Total (T) | Dissolved (D)	Anions (IC)***						Comments
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
9																					
10																					

***Matrix:** A = Air, AQ = Aqueous, B = Bulk, O = Other, P = Product, S = Soil, SD = Sediment, SL = Solid, W = Water, DW = Drinking Water, GW = Ground Water, SW = Storm Water, WW = Waste Water

****Metals (Circle):** MTCA-5 RCRA-8 Priority Pollutants TAL *Individual:* Ag Al As B Ba Be Ca Cd Co Cr Cu Fe Hg K Mg Mn Mo Na Ni Pb Sb Se Sr Sn Ti Tl V Zn

*****Anions (Circle):** Nitrate Nitrite Chloride Sulfate Bromide O-Phosphate Fluoride Nitrate+Nitrite

Turn-around Time:
☐ Standard ☐ Next Day
☐ 3 Day ☐ Same Day
☐ 2 Day _____ (specify)

I represent that I am authorized to enter into this Agreement with Fremont Analytical on behalf of the Client named above, that I have verified Client's agreement to each of the terms on the front and backside of this Agreement.

Relinquished (Signature)	Print Name	Date/Time	Received (Signature)	Print Name	Date/Time
x			x		
Relinquished (Signature)	Print Name	Date/Time	Received (Signature)	Print Name	Date/Time
x			x		