

Client Information
Client:
Contact:
Address:
City, State & Zip:
Telephone:
Fax:

NELSON ANALYTICAL LAB



Chain of Custody

Project Information
System/Client Name:
System/Client Location:
EPA ID or Permit #:
Project Description:
Water Type: Drinking / Surface / Waste
Sampler Name:

Preservative:

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Sample ID --- (this column for lab use)	Sample Location	Date and Time Collected	Composite or Grab (C/G)	No. of Containers	Chlorinated (Y/N)								Comments

Notes:

<u>Relinquished by:</u>	<u>Date & Time:</u>
<u>Received by:</u>	
<u>Relinquished by:</u>	
<u>Received at lab by:</u>	

Receipt Checklist	
Received within hold time?	Y / N
Received enough volume for analysis?	Y / N
Received within acceptable temperature range?	Y / N
Received with appropriate preservative?	Y / N
Received in acceptable condition for analysis?	Y / N

Nelson Analytical Lab's Sample Acceptance Policy can be found on our website.