



Suburban Water Testing Labs

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 610-929-3666 - Fax: 610-929-8321 - h2otest.com

Chain of Custody Record

TAT (Circle One): Standard - 24hr - 48hr - 72hr - Other _____
 (Additional charges may apply for rush TAT. If not specified, standard TAT will apply)

Order ID: _____

Client Name: _____ Address: _____ Phone: _____ _____ Fax: _____ Contact Name: _____ Email: _____	Project Name: _____ Address: _____ _____ Payment / P.O. Info: _____
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Comments:

SWTL Sample Number	Sample Description / Site ID:	Date Sampled	Time Sampled	Samplers Initials	Test(s) Requested:	Bottle Quantity	See Codes Below				Comments / Field Data:
							Matrix	Sample Type	Bottle Type	Preservative	

Relinquished By:	Date: _____ Time: _____	On ice Y / N If no, Temp °C: _____	Sample Conditions	Matrix Key	Bottle Type Key	Reporting Options
Received By:	Date: _____ Time: _____	On ice Y / N If no, Temp °C: _____	Submitted with COC? Y / N	NPW = Non-Potable Water Solid = Raw Sludge, Dewatered sludge, soil, etc. (reported as mg/kg)	P = Plastic G = Glass O = Other	[] SDWA Reporting PWSID: _____
Relinquished By:	Date: _____ Time: _____	On ice Y / N If no, Temp °C: _____	Number of containers match number on COC? Y / N	PW = Potable Water SDWA = Safe Drinking Water Act Potable Sample	Preservative Key	[] Fax [] Email
Received in Lab By:	Date: _____ Time: _____	On ice Y / N If no, Temp °C: _____	All containers in tact? Y / N	Sample Type Key	N = Sodium Thiosulfate A = Ascorbic Acid H = HNO ₃ C = HCl S = H ₂ SO ₄ OH = NaOH O = Other NA = None Required	[] Other _____ [] Return a copy of this form with Report
			Tests within holding times Y / N	G = Grab 8HC = 8 Hr. Composite 24HC = 24 Hr. Composite	SDWA Sample Types	
			VOC vials free of headspace? Y / N	D=Distribution E=Entry Point R=Raw C=Check S=Special M=Maximum Residence		

Signing this form indicates your agreement with SWTL's Standard Terms and Conditions unless otherwise specified in writing. SLF059 Rev. 1.1 Effective March 15, 2009
 Shaded areas are for SWTL use only.