

Chain of Custody Record



180-64689 Chain of Custody
 Lab PM: Gamber, Carrie L
 E-Mail: carrie.gamber@testamericainc.com

Sampler: *KRF*
 Phone: *603-766-2976*

Client Information
 Client Contact: *Kathlin Fleming / christopher oneil*
 Company: Groundwater Sciences Corporation

Address: 2601 Market Place Street, Suite 310
 City: Harrisburg
 State, Zip: PA, 17110-9307
 Phone: 901-8194(Tel)
 Email: kfleming@groundwatersciences.com
 Project Name: Harley Davidson
 Site: *SPBA*

Due Date Requested: *Thursday, April 6th 2017*
 TAT Requested (days): *4/6/17 as per convo with Carrie Gamber*
 PO #: *10012.31*
 WO #: *Purchase Order not required*

Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=grab)	Matrix (W=water, S=solid, O=soil, BT=issue, AA=)	Field Filtered Sample (Yes or No)		Analysis Requested		Total Number of Containers	Special Instructions/Note:
					Perform MS/MSD (Yes or No)	Preservation Code:	Field Filtered Sample (Yes or No)	Preservation Code:		
<i>HD-SPBA-SB-007-05/10-0</i>	<i>3/28/17</i>	<i>0930</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-5/5.5-0</i>	<i>3/28/17</i>	<i>1025</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-10/10.5-0</i>	<i>3/28/17</i>	<i>1040</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-15/15.5-0</i>	<i>3/28/17</i>	<i>1240</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-20/20.5-0</i>	<i>3/28/17</i>	<i>1310</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-25/25.5-0</i>	<i>3/28/17</i>	<i>1330</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-30/30.5-0</i>	<i>3/28/17</i>	<i>1350</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-35/35.5-0</i>	<i>3/28/17</i>	<i>1410</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-40/50-0</i>	<i>3/28/17</i>	<i>1700</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-SPBA-SB-007-50/55-0</i>	<i>3/28/17</i>	<i>1745</i>	<i>G</i>	<i>S</i>	<i>M</i>	<i>N</i>	<i>2</i>	<i>1</i>	<i>4</i>	
<i>HD-0C2-0/1-2</i>	<i>3/28/17</i>	<i>1200</i>	<i>G</i>	<i>W</i>	<i>M</i>	<i>N</i>	<i>1</i>	<i>2</i>	<i>2</i>	

Possible Hazard Identification
 Non-Hazard Flammable Skin Irritant Poison B Unknown Radiological
 Deliverable Requested: I, II, III, IV, Other (specify)

Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)
 Return To Client Disposal By Lab Archive For _____ Months
 Special Instructions/QC Requirements:

Empty Kit Relinquished by: *[Signature]* Date: *3/28/17 1800*
 Relinquished by: *[Signature]* Date/Time: *3/28/17 1800*
 Relinquished by: *[Signature]* Date/Time: *3/28/17 1800*
 Relinquished by: *[Signature]* Date/Time: *3/28/17 1800*

Received by: *[Signature]* Date/Time: *3/29-17*
 Received by: *[Signature]* Date/Time: *890*
 Received by: *[Signature]* Date/Time: *890*

Company: *[Signature]*
 Company: *[Signature]*
 Company: *[Signature]*

Custody Seal No.: *[Signature]*
 Custody Seals Intact: Yes No

Cooler Temperature(s) °C and Other Remarks:

Preservation Codes:
 M - Hexane
 N - None
 O - AsNaO2
 P - Na2SO4S
 Q - Na2SO3
 R - Na2S2O3
 S - H2SO4
 T - TSP Dodecahydrate
 U - Acetone
 V - MCAA
 W - pH 4-5
 X - EDTA
 L - EDA
 Z - other (specify)
 Other:

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Client Information Client Contact: <u>Christopher Orsi</u> Company: <u>Groundwater Sciences Corporation</u> Address: <u>2601 Market Place Street, Suite 310</u> City: <u>Harrisburg</u> State, Zip: <u>PA, 17110-9307</u> Phone: <u>901-8194(Tel)</u> Email: <u>kflerning@groundwatersciences.com</u> Project Name: <u>Hartley Davidson</u> Site: <u>SPOA</u>		Sampler: <u>USF</u> Lab PM: <u>Gamber, Carrie L</u> Phone: <u>631-766-2476</u> E-Mail: <u>carrie.gamber@testamericainc.com</u>		Carrier Tracking No(s): Job #:		COC No: 180-36449-8014.2 Page: <u>2 of 2</u> Job #:				
Due Date Requested: <u>4/6/17</u> TAT Requested (days): <u>42 days to be provided by Thursday April, 6th 2017 at 12:00 per contract</u> PO #: <u>Purchase Order not required</u> WO #:			Analysis Requested Perform MS/MSD (Yes or No) <input checked="" type="checkbox"/> Field Filtered Sample (Yes or No) <input checked="" type="checkbox"/> Total Number of Containers <input checked="" type="checkbox"/>							
Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=grab)	Matrix (W=water, S=solid, O=soil, A=air)	Preservation Code:	Field Filtered Sample (Yes or No)	Perform MS/MSD (Yes or No)	Analysis Requested	Carrier Tracking No(s)	COC No
H0-SPBA-SB-007-50/55-DM	3/28/17	1745	G	S	S	WN	2	1		
L0-SPBA-SB-007-50/55-DM	3/28/17	1745	G	S	S	WN	2	1		
H0-OC1-0/1-3	3/28/17	1730	G	W	W	WN				
H0-OC1-0/1-4	3/28/17	1738	G	W	W	WN				
Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Unknown <input type="checkbox"/> Radiological Deliverable Requested: I, II, III, IV, Other (specify)										
Sample Disposal (A fee may be assessed if samples are retained longer than 1 month) <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months Special Instructions/QC Requirements:										
Empty Kit Relinquished by: _____ Relinquished by: _____ Relinquished by: _____ Relinquished by: _____		Date/Time: <u>3/28/17 1800</u> Date/Time: Date/Time:		Date/Time: Date/Time: Date/Time:		Date/Time: Date/Time: Date/Time:		Date/Time: Date/Time: Date/Time:		
Custody Seal Intact: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Custody Seal No.:		Cooler Temperature(s) °C and Other Remarks:		Received by: <u>DWADON</u> Date/Time: <u>3-29-17</u> Company: <u>USF</u> Received by: <u>840</u> Date/Time: Company:				