Chain-of-Custody and Analysis Request

AQUA-TECH LABORATORIES, INC.

Client /Project:

Contact Info

Name

Address

City State ZIP

Phone / Email

Definitions

DW - Drinking Water
NP - Non-Potable Water
S - Solid

CM - Custody Maintained
CTU - Custody Transfer Unbroken
CT - Corrected Temperature
SUB - Subcontracted Analysis

(+) Container Type
P - Plastic
G - Glass
T - Teflon©

By relinquishing the samples listed below to Aqua-Tech, the client agrees to the following terms.
Samples will be analyzed by a method that is within Aqua-Tech Laboratories' NELAC fields of accreditation. Analytes requiring a certified method that is not within Aqua-Tech's fields of accreditation will be subcontracted to a NELAC certified lab that is certified for that method. Clients will be notified of the subcontract lab's details. Other analytes not requiring accreditation will be analyzed by a compendial method. If a specific method is required, the client will note the method in the "Analysis Requested" column. The client approves all method modifications documented by Aqua-Tech or the subcontract lab. A current list of Aqua-Tech's NELAC fields of accreditation and other methods are available on request.

T104704371
TX239

Aqua-Tech Laboratories, Inc.

Austin
7500 Hwy 71 W Suite 105
Austin, TX 78735
512.301.9559

Bryan
635 Phil Gramm Blvd.
Bryan, TX 77807
979.778.3707

Test results meet all accreditation/certification requirements unless stated otherwise.

Work Order / C-O-C

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Sample Custody

Relinquished by (print & sign)	☐ Sampler ☐ Client ☐ ATL Field	Date / Time	☐ Iced / Refrig ☐ Custody Sealed
Received by (print & sign)	☐ Client ☐ ATL Field	Date / Time	☐ Iced / Refrig ☐ CM / CTU
Relinquished by (print & sign)	☐ Client ☐ ATL Field	Date / Time	☐ Iced / Refrig ☐ CM / CTU
Received by (print & sign)	☐ Client ☐ ATL Field	Date / Time	☐ Iced / Refrig ☐ CM / CTU
Relinquished by (print & sign)	☐ Client ☐ ATL Field	Date / Time	☐ Iced / Refrig ☐ CM / CTU / sealed
Received by (print & sign)	☐ Lab	Date / Time	☐ Cond Good ☐ Iced / Refrig ☐ CM / CTU

Client Comments:

*** Preservatives**

1 < 6 °C (unfrozen)
2 H2SO4
3 HCl
4 HNO3
5 Na2S2O3
6 NaOH
7

Receipt in Lab

Cooler ID :		
Temperature (°C) : read / CT		
Preservation Correct ?	YES NO	YES NO
Post Preservatives ?	YES NO	YES NO
Thermometer ID :		
pH Paper ID :		

Lab Comments

Field Sample ID (record field data for each sample in space below)	Start Date	Start Time	End Date	End Time	Composite Type	Sample Matrix	Container(s) Bottle Count	Volume (Size in L)	Type (+)	Preserv-ative(s) *	LAB USE ONLY BELOW (initials) Cooler ID	pH Check	SUB	WORK ORDER
														Sample
Analysis Requested & Comments:														
														Sample
Analysis Requested & Comments:														
														Sample
Analysis Requested & Comments:														
														Sample
Analysis Requested & Comments:														
														Sample
Analysis Requested & Comments:														

Chain-of-Custody and Analysis Request (continued)

Client / Project Name:

Comments

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7500 Hwy 71 W Suite 105
Austin, TX 78735
512.301.9559

www.aqua-techlabs.com
corp@aqua-techlabs.com

Work Order / C-O-C

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Field Sample ID	Start Date	Start Time	End Date	End Time	Composite Type	Sample Matrix	Container(s) Bottle Count	Volume (Size in L)	Type (+)	Preserv-ative(s) *	LAB USE ONLY BELOW Cooler ID	pH Check	SUB	WORK ORDER
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Analysis Requested & Comments:														
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