

US EPA ARCHIVE DOCUMENT

**APPENDIX D**  
**Chain-of-Custody Forms**









4124 (0807)  
Client

Project Manager: Wendy Clark Date: 01/10/2008 Chain of Custody Number: 11111111

Address: 1111 CAPTAIN AV Telephone Number (Area Code)/Fax Number: 11111111/111111 Lab Number: 111111 Page 1 of 1

City: DALLAS TX 75201 Site Contact: 11111111 Lab Contact: 11111111

Project Name and Location (State): DALLAS TEXAS Carrier/Waybill Number: FBI 3619 7512 1153

Contract/Purchase Order/Quote No.: 16952

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix					Containers & Preservatives					Special Instructions/ Conditions of Receipt					
			Air	Aqueous	Sed	Soil	Unpres	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH						
<u>GW-D02</u>	<u>1/9/08</u>	<u>1228</u>	<u>X</u>					<u>1</u>										
<u>GW-D02L</u>	<u>1/9/08</u>	<u>1105</u>	<u>X</u>					<u>1</u>										
<u>GW-D01</u>	<u>1/9/08</u>	<u>1131</u>	<u>X</u>					<u>1</u>										

Possible Hazard Identification:  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify): SEND TO LAB BY JANA DAVISON 703.08.3051

1. Relinquished By: Wendy Clark Date: 1/10/08 12:00 Time: \_\_\_\_\_  
 2. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 3. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Comments: \_\_\_\_\_







Chain of Custody Record

TestAmerica Laboratories, Inc.

Your Company Name here <b>TECHLAW, INC.</b> Address <b>7604 N. PAUL ST. STE 600</b> City/State/Zip <b>DALLAS, TX 75207</b> 972.754.6038 <b>1444 Oak Lawn Av. Phone 214.953-6045</b> <b>Dallas, TX 75207 FAX 214.754.0819</b> Project Name: <b>Shawnee</b> Site: P.O.#		Client Contact Project Manager: <b>D. Dally, Director</b> Tel/Fax: <b>972/754-0838</b> Analysis Turnaround Time Calendar (C) or Work Days (W) <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 week <input type="checkbox"/> 2 days <input type="checkbox"/> 1 day		Date: <b>1/8/08</b> Carrier:		COC No. of COCs Job No. SDG No.	
Sample Identification <del>NEG DW-03</del> GW - D03 <del>NEG DW-03L</del> GW - D03L <del>NEG DW-03B</del> GW - 508 <del>GW - D07</del>		Sample Date 1/7/08 1/7/08 1/7/08 1/7/08		Sample Time 1005 1700 1758 848		Sample Type GW GW GW GW	
Matrix Cont.		No. of Cont.		Site Contact: Lab Contact:		Sample Specific Notes: <b>Test x4 preservative</b> 15 V 15 V 11 V	
Preservation Used: (1=Ice, 2=HCl; 3=H2SO4; 4=HNO3; 5=NaOH; 6=Other)		Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown		Disposal By Lab <input type="checkbox"/> Archive For _____ Months <input checked="" type="checkbox"/> Return To Client		Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)	
Special Instructions/QC Requirements & Comments: <b>Send Results to Jan Dawson (703) 818-3254</b>		Relinquished by: <b>Wallace Otker</b>		Received by: <b>TechLaw, Inc</b>		Date/Time: <b>1/8/08/1400</b>	
Relinquished by:		Received by:		Date/Time:		Company:	
Relinquished by:		Received by:		Date/Time:		Company:	













# Chain of Custody Record

SEVERN  
TRENT

# STL

Severn Trent Laboratories, Inc.

4124 (0807)

Client <i>Wally O'Rear, Tril Law Inc</i>		Project Manager <i>Wally O'Rear</i>		Date <i>2-13-08</i>	Chain of Custody Number <i>401326</i>
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0036</i>		Lab Number	Page <i>1</i> of <i>1</i>

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Rear</i>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <i>Shumaker / Arkansas</i>			Carrier/Waybill Number <i>Fed EX 8619 9392 7349</i>			
Contract/Purchase Order/Quote No. <i>70952</i>						

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	Heavy Metals	Mercury	Archival	
			AP	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2					NaOH
<i>SW-13</i>	<i>2/13/08</i>	<i>1227</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		
<i>SW-39</i>	<i>2/13/08</i>	<i>1310</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		
<i>SW-10</i>	<i>2/13/08</i>	<i>1255</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	QC Requirements (Specify) <i>Send Results to Jana Dawson 703-818-3254</i>
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1. Relinquished By <i>Wally O'Rear</i>	Date <i>2/14/08</i>	Time <i>1400</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments



















**Chain of Custody Record**

4124 (0907)

Temperature on Receipt \_\_\_\_\_

Drinking Water? Yes  No

Client <b>TechLaw, Inc.</b>		Project Manager <b>Wally O'Brien</b>		Date	Chain of Custody Number <b>407338</b>
Address <b>4100 Ambrosia LN</b>		Telephone Number (Area Code) / Fax Number <b>972 / 754-0638</b>		Lab Number	Page <b>1</b> of <b>1</b>
City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75093</b>	Site Contact <b>NA</b>	Lab Contact	Analysis (Attach list if more space is needed)
Project Name and Location (State) <b>Shumaker AR</b>		Carrier/Waybill Number <b>7989 4946 1018</b>			
Contract/Purchase Order/Quote No					

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Special Instructions/ Conditions of Receipt		
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2/NaOH			
<b>IS-AS-01</b>	<b>5/10/08</b>	<b>1318</b>		<b>X</b>											<b>2 1/2 gallons partial parcel partial shipment</b>

Possible Hazard Identification:  Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown

Sample Disposal:  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)

Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify)

1. Relinquished By <b>Wally O'Brien</b>	Date <b>5/17/08</b>	Time <b>1700</b>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments: **Send results to: Jane Dawson, TechLaw, Inc. 14500 Avion Parkway, Suite 300, Channahon, IL 61115-1101 (708) 818-3254**

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

