

Certified By: _____
ARKANSAS
 Department of Environmental Quality

Notes:

(The chain of custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.)

Client/Project/Report Information						Regulatory Information		Report Format		Turnaround Time (TAT) Requested						
Company:		Address:				☐ NPDES ☐ Groundwater ☐ RCRA ☐ Wastewater ☐ Other (Specify)		☐ Single Sample per Page ☐ Multiple Samples per Page ☐ Excel Format Included ☐ Other (Specify)		☐ 4-5 business days (0% surcharge) ☐ 3 business days (50% surcharge) ☐ 2 business days (75% surcharge) ☐ 1 business day (100% surcharge)		Notify laboratory if a rush analysis is required.				
Contact Name:		Email Address:				Matrix Types W - Water WW - Wastewater S - Soil/Solid O - Other (Specify)										
Phone:		Fax:				Sample Types G - Grab C - Composite O - Other (Specify)										
F.A.S.T. Quote #:		Client Project #:		Client #:		Container Types P - Plastic CG - Clear Glass AG - Amber Glass V - VOA Vial O - Other (Specify)										
Invoice Information Same as above ☐ Yes ☐ No						Preservative Types X - Unpreserved S - H ₂ SO ₄ N - HNO ₃ A - HCl B - NaOH O - Other (Specify)						Requested Parameters				Hazardous (Y/N) Sample Retention Requested (Days) (Normal sample retention is 14 days.)
Company:						Address:						Filter (Y/N) Filter (Y/N) Filter (Y/N) Filter (Y/N) Filter (Y/N)				
Contact Name:																
Phone:						Fax:										
PO/AFE:																
Sample Number	Sample Identification	Sample Matrix	Sample Type	Sample Date/Time	Comments		Number/Type of Containers	Preservative(s) Used	Residual Chlorine Present (Y/N)							
Additional Comments		Relinquished By (Name/Company)		Date/Time		Accepted By (Name/Company)		Date/Time		Sample Conditions Temp. (°C) Ice (Y/N) Intact (Y/N)			Sampler Name (Print)			
													Sampler Signature			
													Date			