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Page	of	

F.A.S.T.
LABORATORIES/RESEARCH

Physical Address: 232 South Broadview Street

Greenrbrier, AR 72058

175 Slatey Ford Road Laboratory Use Only Mailing Address:

Certified By:

Greenbrier, AR 72058

ADEQ

Arrival Temperature:

Felling Analytical Services Technology (F.A.S.T.), LLC

Info@FASTLaboratories.com Email: Website: www.FASTLaboratories.com

(501) 679-2616 Telephone:

F.A.S.T. Order Number:

Notes:

CHAIN OF CUSTODY RECORD				(The chain of custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.)												
Client/Projec	t/Report Information						Regulatory Information	Report For	mat		Turnaround	Time (TAT)	Requested			
Company:		Address:			NPDES Groundwater RCRA Wastewater Other (Specify)		Single Sample per Page			4-5 business days (0% surcharge)			Notify laboratory if a rush analysis is required.			
Contact Name	e:	Email Address:				Matrix Types W - Water WW - Wastewate		Multiple Samples per Page			3 business days (50% surcharge)			. equil cui		
Phone:	. .		Fax:				S - Soil/Solid O - Other (Specify) Sample Types	☐ Exc	el Format Inclu	uded	2 bu	siness days (75%	surcharge)			
F.A.S.T. Quot							G - Grab C - Composite O - Other (Specify)	Other (Specify)			1 business day (100% surcharge)			Date Required:		
Invoice Infor		•			Client #:		Container Types P - Plastic CG - Clear Glass	 			Requested I	Parameters				
	ve 🗌 Yes 🔲 No						AG - Amber Glass V - VOA Vial						Filter (Y/N)	Filter (Y/N)	Filter (Y/N)	ys) ys.
Company:			Address:				O - Other (Specify) Preservative Types	<u>ر</u>		(N/×			(1,11)		(1,11)	e d (Da 14 da
Contact Name	e:						X - Unpreserved S - H ₂ SO ₄	tainer		sent (:quest
Phone:			Fax:				$N - HNO_3$ A - HCl B - NaOH O - Other (Specify)	of Cor) Used	ine Pre						N) ion Re e reter
PO/AFE:						Sample Types G - Grab C - Composite	Number/Type of Containers	Preservative(s) Used	Residual Chlorine Present (Y/N)						Hazardous (Y/N) Sample Retention Requested (Days) (Normal sample retention is 14 days.)	
Commis	Sample		Commis	Sample	Sample		O - Other (Specify)	ခို	erv	qng						ardo ple
Sample Number	Identification	n	Sample Matrix	Type	Date/Time		Comments	N N	Pres	Resi						Haza Sam (Nor
Additional Comments Relinquished By (Name/Company)		Date/Time Accepted By (Name/Company)		Date			ole Conditions o. (ºC) Ice (Y/N) Intact (Y/N		Sampler Name (Print)							
											Sampler Sig	Sampler Signature				
												Date				