# Chain of Custody Record

## Client Contact
- **Your Company Name here**
- **Address**
- **City/State/Zip**
- **Tel/Fax:**
- **P O #**

## Project Manager:
- **Project Name:**
- **Carrier:**
- **Company:**
- **Date:**

## Site Contact:
- **Site:**
- **Date:**
- **Carrier:**
- **Company:**

## Lab Contact:
- **Lab Contact:**
- **Company:**
- **Date/Time:**
- **Date/Time:**

## SDG No.
- **SDG No.:**
- **Job No.:**

## Analysis Turnaround Time
- **Calendar (C) or Work Days (W) __________**
- **TAT if different from Below __________**

## Sample Identification
<table>
<thead>
<tr>
<th>Sample Identification</th>
<th>Sample Date</th>
<th>Sample Time</th>
<th>Sample Type</th>
<th>Matrix</th>
<th># of Cont.</th>
</tr>
</thead>
</table>

## Preservation Used:
- 1= Ice, 2= HCl, 3= H2SO4; 4= HNO3; 5= NaOH; 6= Other __________

## Possible Hazard Identification
- Non-Hazard
- Flammable
- Skin Irritant
- Poison B
- Unknown
- Return To Client
- Disposal By Lab
- Archive For __________ Months

## Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)

## Special Instructions/QC Requirements & Comments:

## Relinquished by:
- **Company:**
- **Date/Time:**
- **Received by:**
- **Date/Time:**

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## COC No.

- __________ of __________ COCs