



Chain-of-Custody Form

Submitted by (Company)	
Address	
City, State, Zip Code	
Phone	FAX

Invoice to (Company)	
Address	
City, State, Zip Code	
Phone	FAX

Contact (print)	
Sampled by (signature)	
Job Number or Project Name	
PO Number	

Sample Method Required ONLY ONE METHOD per COC		Turn-around-time (circle one)		
		Rush	Norm	Ext.
Asbestos by PLM	Improved Interim	<6 hrs	1-3 days	15-30 days
	Analyze all samples? Yes No Analyze 'til positive found (ATPF) ? If so then by Layer or Sample Single Layer Protocol Yes No			
Fibers by PCM	7400(Area) ORM (Personal)	<4 hrs	24 hrs	3-5 days
Asbestos by TEM	AHERA Mod. AHERA	<6 hrs	24 hrs	3-5 days
	Water * Sludge	1-2 days	3-5 days	10 days
	Gravimetry: Chatfield Full	1-2 days	3-5 days	10 days
	Vacuum Dust (ASTM)	3.5 days	5-10 days	N/A
Metals by FLAA	analyte: Cd Cr Cu Ni Pb Zn	<6 hrs	2-3 days	N/A
	matrix: Filter MCE FG			
	Paint by Area by Weight			
	Soil			
	Wipe			
Initial here certifying wipes used are ASTM E1792 compliant				
Fungi	Air Sample Zefon Other ID/Count Bulk Swab Tape: Qualitative (%) Quantitative (cm2)	<6 hrs	1-2 days	N/A
	Culturable Air Bulk/Dust Swab			
Dust	NIOSH 500	<4 hrs	24 hrs	N/A
Other		Call	Call	

Review of Analysis Request _____ Date _____

Sample Number	Description/Location (include agar type/maker/exp. Date)	Sample Date	Sample Time	Vol/Area
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
10)				
11)				
12)				
13)				
14)				
15)				
16)				
17)				
18)				
19)				
20)				

1) Relinquished by:	Date:	Time:	3) Relinquished by:	Date:	Time:
2) Received by:	Date:	Time:	4) Received by:	Date:	Time:
* TEM Water: Sampler's name Required by State of Arizona	Print Name				