CHAIN OF CUSTODY/ REQUEST FOR ANALYSIS

Please print. See back of COC for instructions/terms and conditions.

FAIRWAY LABORATORIES
Environmental Laboratory

2019 9th Ave.
P.O. Box 1925
Altoona, PA 16602

Phone: (814) 946-4306
Fax: (814) 946-8791
Page _____ of _____

Client Name: _____
Address: _____
_____
Contact: _____
Phone #: _____
Fax #: _____
Project Name: _____
Quote/PO #: _____

Receiving Info	Y	N
Custody seals		
Seals Intact?		
Received on ice?		
COC/Labels agree?		
Correct containers?		
Correct preservation?		
VOA head space?		

Sample Temp:_____

TAT: Normal ❑ Rush ❑
Rush TAT subject to pre-approval and surcharge.
Date Required: _____/_____/_____

Reportable to PADEP?
Yes ❑
PWSID # _____

Please Circle Program
ACT II
CERCLA
RCRA
NPDES
SDWA
CWA

Analyses Requested

FLI use only	Sample Description/Location	Sample Date	Sample Time	Grab or Composite	Matrix: Soil	Matrix: Water	Matrix: Other ____	# of Containers							Bottle Type/Comments

FAIRWAY LABORATORIES

By relinquishing my sample to Fairway Laboratories, Inc., I hereby agree to the terms and conditions printed on the reverse.*

Signature	Date	Time	Remarks
Sampled by:			
Received by:			
Relinquished by:			
Received by:			
Relinquished by:			
Received by:			

White Original - FLI File Canary - Customer Mailing/Report Pink - Customer Receipt Copy