CHAIN OF CUSTODY/ REQUEST FOR ANALYSIS

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

2019 9th Ave.
P.O. Box 1925
Altoona, PA 16602
Phone: (814) 946-4306
Fax: (814) 946-8791

FAIRWAY LABORATORIES
Environmental Laboratory

89 Kristi Rd
Pennsdale, PA 17756
Phone: (570) 494-6380

COC # _____

Page _____ of _____

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

Received on ice? Y N

Sample Temp: _____

Reportable to PADEP? Yes ❑

PWSID # _____

Analyses Requested

LAB USE ONLY

FedEx USPS
UPS Other

Tracking # _____

TAT: Normal ❑ Rush ❑

Rush TAT subject to pre-approval and surcharge.

Date Required: ____/____/____

Sample Description/Location	GRAB	Composite	Composite Start: Start Date	Composite Start: Start Time	GRAB -or- Composite End: End Date	GRAB -or- Composite End: End Time	Matrix: Solid	Matrix: Water	Matrix: Other ____	# of Containers	Bottle Type/Comments

Sampled by:	Date	Time	Received by:	Date	Time
Relinquished by:	Date	Time	Received by:	Date	Time
Relinquished by:	Date	Time	Received by:	Date	Time
Relinquished by:	Date	Time	Received by:	Date	Time

Remarks

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

White Original - FLI File Canary - FLI Copy Pink - Customer Receipt Copy