CHAIN OF CUSTODY/ REQUEST FOR ANALYSIS

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

FAIRWAY LABORATORIES
Environmental Laboratory

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Altoona, PA 16602
Phone: (814) 946-4306
Fax: (814) 946-8791

Client Page # _____ of _____

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

Received on ice? Y N

Sample Temp: _____

Reportable to PADEP? Yes ❑

PWSID # _____

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

Analyses Requested

LAB USE ONLY
Work Order # _____
Attach # _____
FLI Page # _____ **of** _____
Tracking # _____
_____

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

Sampled by: (Signature)			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