



# Asbestos in Water - Chain of Custody Form

LA Testing Order Number / Lab Use Only

PHONE:

EMAIL:

<b>Customer Information</b>	Customer ID:		Billing ID:	
	Company Name:		Company Name:	
	Contact Name:		Billing Contact:	
	Street Address:		Street Address:	
	City, State, Zip:	Country:	City, State, Zip:	Country:
	Phone:		Phone:	
	Email(s) for Report:		Email(s) for Invoice:	

**Project Information**

Project Name/No		Purchase Order:	
LAT LIMS Project ID: <small>(If applicable, LA Testing will provide)</small>	US State where samples collected:	State of Connecticut (CT) must select project location: Commercial (Taxable)      Residential (Non-Taxable)	
Sampled By Name:	Sampled By Signature:	No. of Samples in Shipment	

**Turn-Around-Time (TAT)**

24 Hour     
  32 Hour     
  48 Hour     
  72 Hour     
  96 Hour     
  1 Week     
  2 Week

EPA Method 100.2 ( >10um only)     
  EPA Method 100.2 (All fiber sizes ≥ 0.5µm)     
  EPA Method 100.1 ( ≥ 0.5µm only)

**DRINKING WATER COMPLIANCE - BOTTLE ACKNOWLEDGEMENT:** If samples are being submitted for drinking water compliance testing under this Chain of Custody, Client acknowledges that certified, pre-cleaned, asbestos-free sampling bottle(s) as outlined in EPA 100.2 were utilized in the collection of the drinking water samples submitted.

Report results directly to the State?     YES    *If checked, complete all fields below:*

State:		Water System ID:		Facility Code:		Entry Point Number:	
Sample Number	Sample Location	Sample Type (Potable / Non-Potable)	Volume	Date Collected	Time Collected	Temperature (C) Laboratory Use Only	

Special Instructions and/or Regulatory Requirements (Sample Specifications, Processing Methods, Limits of Detection, etc.)

Method of Shipment:		Sample Condition Upon Receipt:		Received on Ice? Check if Yes:	
Relinquished by:	Date/Time:	Received by:	Date/Time:	Received by:	Date/Time:
Relinquished by:	Date/Time:	Received by:	Date/Time:	Received by:	Date/Time:

