



# LA Testing Chain of Custody - One Chain

LA Testing Order Number / Lab Use Only

PHONE:  
EMAIL:

|                             |                      |          |                            |                       |          |
|-----------------------------|----------------------|----------|----------------------------|-----------------------|----------|
| <b>Customer Information</b> | Customer ID:         |          | <b>Billing Information</b> | 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:                   |   |
| EMSL LIMS Project ID:<br><small>(If applicable, EMSL will provide)</small> |                       | US State where samples collected: | State of Connecticut (CT) must select project location:<br><b>Commercial (Taxable)</b> <b>Residential (Non-Taxable)</b> |
| Sampled By Name:   | Sampled By Signature: | No. of Samples in Shipment        |   |

| Turn-Around-Time (TAT)   |        |         |         |         |         |         |        |        |
|--|--------|---------|---------|---------|---------|---------|--------|--------|
| 3 Hour   | 6 Hour | 24 Hour | 32 Hour | 48 Hour | 72 Hour | 96 Hour | 1 Week | 2 Week |
| <small>Please call ahead for large projects and/or turnaround times 6 Hours or Less. *32 Hour TAT available for select tests only; samples must be submitted by 11:30am.</small> |        |         |         |         |         |         |        |        |

|  |   |   |
|--|---|---|
| <p style="text-align: center;"><b>PCMC Air</b></p> <p>NIOSH 7400<br/>NIOSH 7400 w/ 8hr. TWA</p> <p style="text-align: center;"><b>PLM - Bulk (reporting limit)</b></p> <p>PLM EPA 600/R-93/116 (&lt;1%)<br/>PLM EPA NOB (&lt;1%)<br/>POINT COUNT<br/>400 (&lt;0.25%)      1,000 (&lt;0.1%)<br/>POINT COUNT w/ GRAVIMETRIC<br/>400 (&lt;0.25%)      1,000 (&lt;0.1%)<br/>NIOSH 9002 (&lt;1%)<br/>NYS 198.1 (Friable - NY)<br/>NYS 198.6 NOB (Non-Friable - NY)<br/>NYS 198.8 (Vermiculite SM-V)</p> | <p style="text-align: center;"><b>ASBESTOS</b></p> <p style="text-align: center;"><b>TEM - Air</b></p> <p>AHERA 40 CFR, Part 763<br/>NIOSH 7402<br/>EPA Level II<br/>ISO 10312*</p> <p style="text-align: center;"><b>TEM - Bulk</b></p> <p>TEM EPA NOB<br/>NYS NOB 198.4 (Non-Friable-NY)<br/>TEM EPA 600/R-93/116 w Milling Prep (0.1%)<br/>Chatfield SOP</p> <p style="text-align: center;"><b>Other Test (please specify)</b></p> | <p style="text-align: center;"><b>TEM - Settled Dust</b></p> <p>Microvac - ASTM D5755<br/>Wipe - ASTM D6480<br/>Qualitative via Filtration Prep<br/>Qualitative via Drop Mount Prep</p> <p style="text-align: center;"><b>Soil - Rock - Vermiculite (reporting limit)*</b></p> <p>PLM EPA 600/R-93/116 with milling prep (&lt;0.25%)<br/>PLM EPA 600/R-93/116 with milling prep (&lt;0.1%)<br/>TEM EPA 600/R-93/116 with milling prep (&lt;0.1%)<br/>TEM Qualitative via Filtration Prep<br/>TEM Qualitative via Drop Mount Prep</p> <p style="text-align: right;"><small>*Please call with your project-specific requirements.</small></p> |
|--|---|---|

|  |                                       |              |               |
|--|---------------------------------------|--------------|---------------|
| <b>Positive Stop - Clearly Identified Homogeneous Areas (HA)</b> | <b>Filter Pore Size (Air Samples)</b> | <b>0.8um</b> | <b>0.45um</b> |
|--|---------------------------------------|--------------|---------------|

|   |   |  |
|---|---|--|
| <b>LEAD (PB)</b>  | <b>ICP</b>                                    | <b>MAT-SCI (TAT End of Business Day)</b>   |
| <p style="text-align: center;"><b>Flame Atomic Absorption</b></p> <p>Chips SW846-7000B or AOAC 974.2<br/>Soil SW846-7000B/7420<br/>Air NIOSH 7082<br/>Wastewater SM3111B or SW846-7000B/7420<br/>ASTM Wipe SW846-7000B/7420<br/>non-ASTM Wipe SW846-7000B/7420<br/>TCLP SW846-1311/ 7420/ SM3111B</p> | <p>Soilds SW-846 6010D<br/>Air NIOSH 7303</p> | <p>Common Particle ID (large particles)<br/>Full Particle ID (environmental dust)<br/>Basic Material ID (solids)<br/>Advanced Material ID<br/>Physical Testing (Tensile, Compression)<br/>Combustion-By-Products (Soot, Char, Etc.)<br/>X-Ray Fluorescence (elem. Analysis)<br/>X-Ray Diffraction (Crystalline Part.)<br/>MMVF's (Fibrous Glass, RCF's)<br/>Particle Size (Sieve, Microscopy, Laser)<br/>Combustible Dust<br/>Petrographic Examination</p> |

| MICROBIOLOGY   |  |  |
|--|--|--|
| <p style="text-align: center;"><b>Swab and Bulk Samples</b></p> <p>Mold &amp; Fungi - Direct Examination<br/>Mold &amp; Fungi Culture (Genus Only)<br/>Mold &amp; Fungi Culture (Genus &amp; Species)<br/>Bacterial Count &amp; ID (Up to 3 Types)<br/>Bacterial Count &amp; ID (Up to 5 Types)</p> <p style="text-align: center;"><b>Sewage Screen</b></p> <p>Sewage Screen (P/A)<br/>Sewage Screen (Membrane Filtration)</p> <p style="text-align: center;"><b>Water Samples</b></p> <p>Total Coliform &amp; <i>E. Coli</i> (P/A, SM 9223B)<br/>Heterotrophic Plate Count (PP, SM 9251B)<br/>Fecal Coliform (SM 9222D)</p> | <p style="text-align: center;"><b>Air Samples</b></p> <p>Mold &amp; Fungi (Spore Trap)<br/>Mold &amp; Fungi Culture (Genus Only)<br/>Mold &amp; Fungi Culture (Genus &amp; Species)<br/>Bacterial Count &amp; ID (Up to 3 Types)<br/>Bacterial Count &amp; ID (Up to 5 Types)</p> <p style="text-align: center;"><b>DNA &amp; PCR Testing:</b> (See Analytical Guide for Code)<br/>Test Code:</p> <p style="text-align: center;"><b>Legionella:</b> (See Analytical Guide for Code)<br/>Test Code:</p> <p style="text-align: center;"><b>P/A= Presence/Absence, PP= Pour Plate</b></p> | <p style="text-align: center;"><b>IAQ (TAT End of Business Day)</b></p> <p>Nuisance Dust      NIOSH 0500      NIOSH 0600<br/>Airborne Dust      PM10      TSP<br/>Silica Analysis:      All Species<br/>Silica Analysis - Single Species<br/>Alpha Quartz      Cristobalite      Tridymite<br/>HVAC Efficiency<br/>Carbon Black<br/>Airborn Oil Mist<br/>Radon Testing: Call for Kit and COC</p> |

**Other Test (please specify)**

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

|                     |            |                                |           |
|---------------------|------------|--------------------------------|-----------|
| Method of Shipment: |            | Sample Condition Upon Receipt: |           |
| Relinquished by:    | Date/Time: | Received by:                   | Date/Time |
| Relinquished by:    | Date/Time: | Received by:                   | Date/Time |

