

Page: \_\_\_\_\_ of \_\_\_\_\_  
 Project # \_\_\_\_\_  
 GEL Quote #: \_\_\_\_\_  
 COC Number <sup>(1)</sup>: \_\_\_\_\_  
 PO Number: \_\_\_\_\_



GEL Laboratories, LLC  
 2040 Savage Road  
 Charleston, SC 29407  
 Phone: (843) 556-8171  
 Fax: (843) 766-1178

**GEL Work Order Number:** \_\_\_\_\_ **GEL Project Manager:** \_\_\_\_\_

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Sample Analysis Requested <sup>(5)</sup>** (Fill in the number of containers for each test)

Project/Site Name: \_\_\_\_\_ Fax #: \_\_\_\_\_

Should this sample be considered: \_\_\_\_\_  
 Total number of containers: \_\_\_\_\_  
 <-- Preservative Type (6)

Address: \_\_\_\_\_

Collected By: \_\_\_\_\_ Send Results To: \_\_\_\_\_

**Comments**  
 Note: extra sample is required for sample specific QC

| Sample ID<br><i>* For composites - indicate start and stop date/time</i> | *Date Collected<br>(mm-dd-yy) | *Time Collected<br>(Military) (hhmm) | QC Code <sup>(2)</sup> | Field Filtered <sup>(3)</sup> | Sample Matrix <sup>(4)</sup> | Radioactive<br><i>Please supply isotopic info.</i> | (7) Known or possible hazards | Total number of containers |  |  |  |  |  |  |  |  |  |  |  |
|--|-------------------------------|--------------------------------------|------------------------|-------------------------------|------------------------------|--|-------------------------------|----------------------------|--|--|--|--|--|--|--|--|--|--|--|
|  |                               |                                      |                        |                               |                              |  |                               |                            |  |  |  |  |  |  |  |  |  |  |  |
|  |                               |                                      |                        |                               |                              |  |                               |                            |  |  |  |  |  |  |  |  |  |  |  |
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|  |                               |                                      |                        |                               |                              |  |                               |                            |  |  |  |  |  |  |  |  |  |  |  |

**Chain of Custody Signatures** **TAT Requested: Normal: \_\_\_\_\_ Rush: \_\_\_\_\_ Specify: \_\_\_\_\_ (Subject to Surcharge)**

| Relinquished By (Signed) | Date | Time | Received by (signed) | Date | Time | Fax Results: [ ] Yes [ ] No   |
|--------------------------|------|------|----------------------|------|------|---|
| 1                        |      |      | 1                    |      |      | Select Deliverable: [ ] C of A [ ] QC Summary [ ] level 1 [ ] Level 2 [ ] Level 3 [ ] Level 4       |
| 2                        |      |      | 2                    |      |      | Additional Remarks:   |
| 3                        |      |      | 3                    |      |      | <b>For Lab Receiving Use Only: Custody Seal Intact?</b> [ ] Yes [ ] No <b>Cooler Temp:</b> _____ °C |

> **For sample shipping and delivery details, see Sample Receipt & Review form (SRR.)** Sample Collection Time Zone: [ ] Eastern [ ] Pacific [ ] Central [ ] Mountain [ ] Other: \_\_\_\_\_

- Chain of Custody Number = Client Determined
- QC Codes: N = Normal Sample, TB = Trip Blank, FD = Field Duplicate, EB = Equipment Blank, MS = Matrix Spike Sample, MSD = Matrix Spike Duplicate Sample, G = Grab, C = Composite
- Field Filtered: For liquid matrices, indicate with a - Y - for yes the sample was field filtered or - N - for sample was not field filtered.
- Matrix Codes: DW=Drinking Water, GW=Groundwater, SW=Surface Water, WW=Waste Water, W=Water, ML=Misc Liquid, SO=Soil, SD=Sediment, SL=Sludge, SS=Solid Waste, O=Oil, F=Filter, P=Wipe, U=Urine, F=Fecal, N=Nasal
- Sample Analysis Requested: Analytical method requested (i.e. 8260B, 6010B/7470A) and number of containers provided for each (i.e. 8260B - 3, 6010B/7470A - 1).
- Preservative Type: HA = Hydrochloric Acid, NI = Nitric Acid, SH = Sodium Hydroxide, SA = Sulfuric Acid, AA = Ascorbic Acid, HX = Hexane, ST = Sodium Thiosulfate, If no preservative is added = leave field blank

|  |   |  |   |  |
|--|---|--|---|--|
| 7.) Are there any known or possible hazards associated with these samples? | <b>Characteristic Hazards</b><br>FL = Flammable/Ignitable<br>CO = Corrosive<br>RE = Reactive  | <b>Listed Waste</b><br>LW = Listed Waste<br>(F,K,P and U-listed wastes.)<br>Waste code(s): _____ | <b>Other</b><br>OT = Other / Unknown<br>(i.e.: High/low pH, asbestos, beryllium, irritants, other misc. health hazards, etc.)<br>Description: _____ | <b>Please provide any additional details below regarding handling and/or disposal concerns. (i.e.: Origin of sample(s), type of site collected from, odd matrices, etc.)</b> |
|  | <b>RCRA Metals</b><br>As = Arsenic Hg= Mercury<br>Ba = Barium Se= Selenium<br>Cd = Cadmium Ag= Silver<br>Cr = Chromium MR= Miscellaneous<br>Pb = Lead RCRA metals | <b>TSCA Regulated</b><br>PCB = Polychlorinated biphenyls   | _____   |  |