



Full Service Analytical & Environmental Solutions  
 449 Springbrook Road • P.O. Box 240543 • Charlotte, NC 28224-0543  
 Phone: 704/529-6364 • Fax: 704/525-0409

Client Company Name: \_\_\_\_\_  
 Report To/Contact Name: \_\_\_\_\_  
 Reporting Address: \_\_\_\_\_

# WASTEWATER CHAIN OF CUSTODY

PAGE \_\_\_\_ OF \_\_\_\_ QUOTE # TO ENSURE PROPER BILLING: \_\_\_\_\_  
 Project Name: \_\_\_\_\_  
 Short Hold Analysis: (Yes) (No) UST Project: (Yes) (No)  
 \*Please ATTACH any project specific reporting (QC LEVEL I III III IV) provisions and/or QC Requirements  
 Invoice To: \_\_\_\_\_  
 Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax (Yes) (No): \_\_\_\_\_  
 Email (Yes) (No) Email Address: \_\_\_\_\_  
 EDD Type: PDF \_\_\_\_\_ Excel \_\_\_\_\_ Other \_\_\_\_\_  
 Site Location Name: \_\_\_\_\_  
 Site Location Physical Address: \_\_\_\_\_

Purchase Order No./Billing Reference \_\_\_\_\_  
 Requested Due Date  1 Day  2 Days  3 Days  4 Days  5 Days  
 "Working Days"  6-9 Days  Standard 10 days  Push Work Must Be Pre-Approved  
 Samples received after 15:00 will be processed next business day.  
 Turnaround time is based on business days, excluding weekends and holidays.  
 (SEE REVERSE FOR TERMS & CONDITIONS REGARDING SERVICES RENDERED BY PRISM LABORATORIES, INC. TO CLIENT)

**LAB USE ONLY**

Samples INTACT upon arrival? YES NO N/A  
 Received ON WET ICE? Temp \_\_\_\_\_  
 PROPER PRESERVATIVES indicated?  
 Received WITHIN HOLDING TIMES?  
 CUSTODY SEALS INTACT?  
 VOLATILES rec'd W/OUT HEADSPACE?  
 PROPER CONTAINERS used?

**TO BE FILLED IN BY CLIENT/SAMPLING PERSONNEL**  
 Certification: NELAC \_\_\_\_\_ USACE \_\_\_\_\_ FL \_\_\_\_\_ NC \_\_\_\_\_  
 SC \_\_\_\_\_ OTHER \_\_\_\_\_ N/A \_\_\_\_\_  
 Water Chlorinated: YES \_\_\_\_\_ NO \_\_\_\_\_  
 Sample Iced Upon Collection: YES \_\_\_\_\_ NO \_\_\_\_\_

CLIENT SAMPLE I.D.	SAMPLE TYPE AND SIZE (ML)			PRESERVATIVES USED												ANALYSES TO BE PERFORMED ON THE SAMPLES												PRISM LAB ID NO.
	Comp	Grab	Plastic/Glass	Other	None	Iced	HCl	NaOH	HN03	H2SO4	pH	BOD	TSS	Cd	Cr	Cu	Pb	Ni	Ag	Zn	O&G	CN-	NH3 as N					
<b>PRESS DOWN FIRMLY - 3 COPIES</b>																												

Sampler's Signature \_\_\_\_\_ Affiliation \_\_\_\_\_

Upon relinquishing, this Chain of Custody is your authorization for Prism to proceed with the analyses as requested above. Any changes must be submitted in writing to the Prism Project Manager. There will be charges for any changes after analyses have been initialized.

Relinquished By: (Signature) \_\_\_\_\_ Received By: (Signature) \_\_\_\_\_ Date \_\_\_\_\_ Military/Hours \_\_\_\_\_

Relinquished By: (Signature) \_\_\_\_\_ Received By: (Signature) \_\_\_\_\_ Date \_\_\_\_\_

Relinquished By: (Signature) \_\_\_\_\_ Received For Prism Laboratories By: \_\_\_\_\_ Date \_\_\_\_\_

Method of Shipment: NOTE: ALL SAMPLE COOLERS SHOULD BE TAPED SHUT WITH CUSTODY SEAL S FOR TRANSPORTATION TO THE LABORATORY. SAMPLES ARE NOT ACCEPTED AND VERIFIED AGAINST COC UNTIL RECEIVED AT THE LABORATORY.  
 Fed Ex  UPS  Hand-delivered  Prism Field Service  Other \_\_\_\_\_

Composite Type: FLOW TIME HAND (circle one)

Start Date & Time for Composite Sampler: \_\_\_\_\_ Hrs  
 Stop Date & Time for Composite Sample: \_\_\_\_\_ Hrs  
 Date & Time Composite Sample Collected: \_\_\_\_\_ Hrs  
 Total Hours Composite Collected Over: \_\_\_\_\_ Hours  
 Start Flow: \_\_\_\_\_ Gal / Cu Feet  
 End Flow: \_\_\_\_\_ Gal / Cu Feet  
 Total: \_\_\_\_\_

Date & Time Grab(s) Taken: \_\_\_\_\_ Hrs  
 Field pH Meter Calibrated: Yes \_\_\_\_\_ No \_\_\_\_\_  
 Field pH Result: \_\_\_\_\_  
 Field Temp. Result: \_\_\_\_\_  
 Sampler Interrupted: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Why? \_\_\_\_\_

Analyst's Initials: \_\_\_\_\_

**SEE REVERSE FOR TERMS & CONDITIONS**

**PRISM USE ONLY**

Site Arrival Time: \_\_\_\_\_  
 Site Departure Time: \_\_\_\_\_  
 Field Tech Fee: \_\_\_\_\_  
 Mileage: \_\_\_\_\_