



LABORATORY CHAIN OF CUSTODY

LAB CLIENT:
ADDRESS:
Email:
Phone: Fax:
Credit Card #: EXP.

DATE:
CONTACT NAME:
PROJECT:
PO#:

Turnaround Time: *Same Day 24 Hours 48 Hours 3 Days 5 Days 7 Days Legionella -14 Days **Evening/Weekend (Surcharge applies)

Time Received:

Table with columns for Sample #, Date Sampled, Asbestos, Fire, Mould, Lead, VOC (air), Radon, Bacteria, Silica, Dust, and Sample Description / Cassette #.

Signature:
Yellow Copy: CLIENT
White Copy: LAB
*Same Day turnaround availability is dependant on lab sample volume/Same Day turnaround not available for all analysis. Inquire within.
Lead Rush-48 hour turnaround. VOC's-5 days turnaround
**Evening/Weekend analysis must be pre-arranged with the lab