CHAIN OF CUSTODY RECORD RTI LABORATORIES, INC. Environmental, Chemical & Materials Testing

PAGE:	OF:

MAIN LAB & HEADQUARTERS

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Phone (734) 422-8000

Fax (734) 422-5342 www.rtilab.com

Please Include Email Address of Report Recipient Whenever Possible !!!

SUBMIT	FING COMPANY:	REPORT TO:										BILL TO:									
PROJEC	T NAME:		PROJE	QUOTE #:				COMPANY:													
SPECIAL	. INSTRUCTIONS / COMME	PHONE:																			
		FAX:	FAX: EMAIL:																		
SAMPLER'S PRINTED NAME: SAMPLE								AMPLER'S SIGNATURE:					ANALY	TICAL	PARAN	METERS	3				
ITEM#	SAMPLE I.D.	DATE SAMPLED	TIME	AIR	SOLID	FLUID	VOLUME	SAMP	PLE DESCRIPTION	NBR OF CONTAINERS										COMMENTS nol Preserved W)T Sample Notati etc.	
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
9																					
10																					
Relinquished By: Date T			ime Received By:					ate:	te: Time:						FOR LAB USE ONLY						
Relinquished By:			Date	Ti	ime	Red	ceived By:			Date:		Time:		Were samples preserved Were samples filtered			d	in field	in lab in lab	N/A N/A	
Relinquis	Date	Ti	ime	Re	ceived By:			Date:		Time:			Temp of samples				°C On Wet Ice ?				
	3rd BE		Comments:																		
	Distribution: White and Yel	llow - Lab;	Pink - Field				-		verse side for Labora	tory Te	rms an	d Cond	ditions	of serv	ice						