



SAMPLE LOG SHEET & CHAIN OF CUSTODY

ENVIRONMENTAL MONITORING, INCORPORATED
 ENVIRONMENTAL CONSULTANTS ▲ ANALYTICAL LABORATORIES
 P.O. Box 1190 ▲ Norton, Virginia 24273 ▲ 276-679-6544

CUSTOMER INFORMATION: Shaded Areas • LAB INFORMATION: White Areas

*CLIENT: _____ BILLING ADDRESS: _____
 *CONTACT: _____ CITY: _____

*COLLECTED BY (print) _____
 COLLECTOR(S) SIGNATURE(S) _____
 TURN-AROUND (circle): **2 Day** **3 Day** **5 Day** **10 Day** **Regular**
 (Working Days) (Working Days) (Working Days) (Working Days) (15 Working Days)

Additional Cost May Apply - Any TAT Not Specified Will Be Regular

*SITE ID: _____

CLIENT PROJ. NO.	EMI PROJECT MANAGER	Special Instructions / QC Requirements & Comments
*EMI PROJECT NO.:		

*PARAMETER (ANALYSIS REQUESTED)							

STATE/ZIP _____
 PHONE () _____
 FAX () _____
 Purchase Order No. _____

*PRESERVATIVE USED:							
Cool < 6°C	HNO ₃	HCl	H ₂ SO ₄	Na OH	Other		

EMI No.	EMI SAMPLE #	*CUSTOMER SAMPLE IDENTIFICATION	*DATE COLLECTED	*TIME COLLECTED	*SAMPLE MATRIX	*No. of CNTRS.												
1.																		
2.																		
3.																		
4.																		
5.																		
6.																		
7.																		
8.																		
9.																		
10.																		

SAMPLES WILL BE DISPOSED OF IN ACCORDANCE WITH EMI's TERMS & CONDITIONS OR RETURNED TO CLIENT OR Archive for _____ months

REMARKS

Check Shaded Area for Each Parameter Requested on Each Sample
 White Area Lab Use Only

QA Review: _____

Anomaly Report Required: _____

Hazard Information: (circle) **Non Hazard** **Flammable** **Skin Irritant** **Poison B** **Unknown**

*Relinquished by (sign)	*Date/Time	*Received By (sign)	*Relinquished by (sign)	*Date/Time	*Received By (sign)
*Relinquished by (sign)	*Date/Time	*Received By (sign)	*Relinquished by (sign)	*Date/Time	*Received By (sign)

Report to be sent (if different than customer information):

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE/ZIP _____ FAX () _____

*METHOD OF SHIPMENT TO LAB (circle) **US MAIL** **UPS** **FED. EX.** **EMI-DIRECT** **EMI PICKUP** **PERSONAL DELIVERY** **OTHER**

Temperature of Cooler upon Receipt by Lab _____

PH Meter # _____ BIN # _____ No. of Containers _____