



FQLabs

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CHAIN OF CUSTODY AND ANALYSIS REQUEST

DATE: _____ PAGE _____ OF _____
 CUSTOMER NO. _____ LAB NO. _____

CLIENT NAME:

EMAIL:

ANALYSES REQUESTED:

AIRBILL NO: _____

ADDRESS:

COOLER TEMP: _____

PROJECT NAME:

PROJECT NO:

P.O. NO:

PRESERVED: _____

PROJECT MANAGER:

PHONE NO:

FAX NO:

SAMPLER NAME: (Printed)

(Signature)

REMARKS:

TAT (Analytical Turn Around Time) 0 = Same day; 1 = 24 Hour; 2 = 48 Hour; (Etc.) N= Normal

CONTAINER TYPES: B = Brass, G = Glass, P = Plastic, V = VOA Vial, O = Other:

LAB USE ONLY SAMPLE NO.	DATE SAMPLED	TIME SAMPLED	SAMPLE DESCRIPTION	MATRIX		CONTAINER			GRAB/ COMP	SAMPLE CONDITION/ COMMENTS:
				WATER	OTHER	#	TYPE			
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

Relinquished By: (Signature and Printed Name) Date: _____ Time: _____

Received By: (Signature and Printed Name) Date: _____ Time: _____

SAMPLE DISPOSITION:

- 1. Samples returned to client? YES NO
- 2. Samples will not be stored over 30 days, unless additional storage time is requested.
- 3. Storage time requested: _____ days

Relinquished By: (Signature and Printed Name) Date: _____ Time: _____

Received By: (Signature and Printed Name) Date: _____ Time: _____

Relinquished By: (Signature and Printed Name) Date: _____ Time: _____

Received By: (Signature and Printed Name) Date: _____ Time: _____

SPECIAL INSTRUCTIONS:

By _____ Date _____