Chain of Custody

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WATER SYSTEMS INC.

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Approval Date: 9/4/24 *SC Lab ID #32576*

Client Name: _____

Report To: _____ Phone #: _____

Address: _____ Project: _____

_____ _____

Email: _____

Requested Analysis

BT:
PC:

Bottle Type(**BT**): **P**lastic / **G**lass

Preservation Code(s)(**PC**):

1 = Ice
2 = H2SO4
3 = HNO3
4 = HCl
5 = NaOH
6 = Na2S2O3
7 = None
8= Other: _____

*write preservative lot in comments if applicable

Matrix Code(s):

WW = Wastewater
DW = Drinking Water
GW = Groundwater
SW = Surface Water
O = Other

Collection Date	Collection Time	Sample Description	Grab	Comp	Matrix Code	# Bottles	COMMENTS* / WSI SAMPLE ID#

TOTAL RESIDUAL CHLORINE

Location	Time Collected	Time Analyzed	Results	DPD Lot #	Meter ID	WSI Sample ID#

Sampler print name: _____

COMPOSITE INFORMATION

Compositor ID: _____

Flow Meter ID: _____

Start Date/Time: _____

End Date/Time: _____

Harvest Temperature: _____

Flow Total: _____

Sampler / Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by lab:	Date:	Time:

LAB USE ONLY

Field pick up temp: _____ Therm.#: _____

Lab receipt temp: _____ Therm.#: _____

Blank Temp (if applicable): _____

Delivered to lab by:

_____WSI _____Client _____Courier

Received on ice: _____Yes _____No