**Client Information:**

**Company Name:** _____

Address: _____

_____

Office Phone # _____

**eMail Results to the below:**

Name(s): _____

eMail Address: _____

eMail Address: _____

**PRECISION TESTING LABS**

**2161 Whitesville Rd, Toms River, NJ 08755**

**Tel.** 732-905-5000 **Fax** 732-279-4422

**email**: ptl@ptlabs.net **web**: www.ptlabs.net

**Project Information:**

**Project Name on Results:** _____

Project Address: _____

_____

**Turnaround:** Standard (up to 2 weeks) ____ 24 HRS ____ 48 HRS ____

(Rushes incur additional fees.) 72 HRS ____ 4-Day ____ 5-Day ____

**Company to Invoice:** _____

(if different)

Page ____ of ____

**P.O.#** _____ **(Lab Only)** Temperature: ____ °C

**Matrix Codes**

**GW**=Ground Water **WW**=Waste Water **SW**=Surface Water

**DW**=Drinking Water **S**=Soil **O**=Oil **L**=Liquid **SD**=Sludge

**B**=Blank **P**=Product or Gasoline **K**=Solid (specify) :_____

**PRESERVATIVE CODES:** **0**=ice **1**=HCl **2**=$H_2SO_4$ **3**=NaOH **4**=$HNO_3$ **5**= _____

**Collection Information**

| Sample ID | Sample Location or Depth (Optional) | Sample Date (MM-DD-YY) | Time Sampled (Military Time) | Sampled by (initials) | Grab (G) or Comp (C) | Matrix CODE * → | # of Containers | Container: G=Glass, E=En Core, P=Plastic | Chlorine may be in this sample. | DRO | EPH Cat. 1 | PCB's | Pesticides | VO + 15 TCL | SPLP VO Extraction | BN + 15 TCL with SIM | BN + 15 TCL NO SIM | PAH | Diesel-Fuel #2 Age-Date Analysis + Interpretation | TAL Metals | TAL / TCL+30 | | | | | | ← List Preservative Code → Lab Sample # |
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**CONTINGENCIES:** BN Naphth+2-Methyl ____ SPLP Naphth+2-Methyl ____ Other _____

**INSTRUCTIONS:** _____

**NJ Regulatory Criteria:** GWQC ____ IGWQC ____ EPH Guidance ____ IGWSSL ____ RDCSRS ____ NRDCSRS ____ Other ____

**Final Signed Report Type:**

Standard (Results Only) ____ EDD (free download) ____

NJ Reduced ____ NJ Full ____ EDD ($20 by email) ____

**SIGN BELOW WHEN DELIVERING SAMPLES.** Each time samples change possession, including courier delivery, custody must be documented.

| Relinquished by: | Received by: | Relinquished by: | Received by: | Relinquished by: | Received by: |
|---|---|---|---|---|---|
| Print Name: | Print Name: | Print Name: | Print Name: | Print Name: | Print Name: |
| Signature: | Signature: | Signature: | Signature: | Signature: | Signature: |
| Agent of: | Agent of: | Agent of: | Agent of: | Agent of: | Agent of: |
| Date: / / Time: | | Date: / / Time: | | Date: / / Time: | |

White : PTL Office Yellow : Billing Pink : Client