



Precision Testing Labs, Inc.
 Certified Analytical Testing Services
 NJDEP Cert# 15005
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PROJECT COMMUNICATION FORM

Client Name: _____ Project Manager: _____

Project Name: _____ LSRP: _____

Contact Info: _____

Sample Matrix, TAT, Data Deliverables, DKQP Analyses/Methods & Equivalents: See chain of custody

Constituents of Concern: Please note any known or suspected contaminants in high concentrations or any non-standard analytes not contained in routine target lists. (If requesting non-routine compounds that have no regulatory criteria, indicate required reporting limit for each compound.)

<u>Regulatory criteria to be met for this project:</u>	<u>Soil</u> <u>Samples</u>	<u>Aqueous</u> <u>Samples</u>
<input type="checkbox"/> Residential Direct Contact Soil Remediation Standards - RDCSRS	<input type="checkbox"/>	
<input type="checkbox"/> Nonresidential Direct Contact Soil Remediation Standards - NRDCSRS	<input type="checkbox"/>	
<input type="checkbox"/> Impact to Ground Water Soil Screening Levels - IGWSSL	<input type="checkbox"/>	
<input type="checkbox"/> Default Leachate Criteria for Class II Ground Water (SPLP) - LC	<input type="checkbox"/>	
<input type="checkbox"/> UHOT (Unregulated Heating Oil Tank Program)	<input type="checkbox"/>	
<input type="checkbox"/> Hexavalent Chromium Cleanup Criterion	<input type="checkbox"/>	
<input type="checkbox"/> <u>Initial Potable Water Samples</u>		<input type="checkbox"/>
<input type="checkbox"/> NJ Tech Regs (NJAC 7:26E) Table 2.1		
<input type="checkbox"/> <u>Diesel, Fuel oil No.2</u>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <u>Gasoline (Not Leaded or Aviation gas)</u>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <u>Unknown contaminants</u>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> <u>Other Petroleum Prod. Specify: _____</u>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Extractable Petroleum Hydrocarbons for Site Remediation	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Specific Ground Water Quality Criteria - GWQC		<input type="checkbox"/>
<input type="checkbox"/> <u>Need Low-Level VO: EDB, DBCP, or 123TCP</u>		<input type="checkbox"/>
<input type="checkbox"/> Surface Water Quality Criteria - SWQC		<input type="checkbox"/>
<input type="checkbox"/> Maximum Contaminant Level (MCL) for State Regulated VOCs		<input type="checkbox"/>
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Project Phase:

Site Investigation Remedial Invest. Rem. Action

PROJECT SPECIFIC Quality Control Requirements: Normally multiple projects are run as a batch, with one set of QC per batch. Check the box if you require the QC to be run on YOUR samples. If # of samples is less than 20, a cost may be incurred.

Matrix Spike Matrix Spike Dup Sample Duplicate