Lab Report Address     Turnaround Time     TO BE COMPLETED BY MICROBAC       Client Name:     Client Name:     □ Routine (5 to 7 business days)     Temperature Upon Receipt (°C)       Therm ID     Therm ID       Address:     Holding Time	<b>⊘</b> MICRO	MICROBAC* 5309 Reidland Rd., Paducah, KY 42003   270.898.3637 p   270.898.3666 f														CHAIN OF CUSTODY RECORD  Number  Instructions on back			
Client Name:  Client Name:  Address:  Address:  City, State, Zip: City, State, Zip: Contact:  Contact:  Contact:  Contact:  Report Type Custody Seals Intact?   Yes   No   N/A  Telephone No.:  Send Invoice via:   Mail   Fax   e-mail (address)  Send Report via:   Mail   Fax   e-mail (address)  Send Invoice via:   Mail   Fax   e-mail (address)  Send Invoice via:   Sampler Phone No.:  Sampler Signature:  Sampler Signature:  Sampler Phone No.:  * Matrix Types: Soil/Soild (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  REQUESTED ANALYSIS	Lab Report Add		Invaice Address						Turnaround Time										
City, State, Zip: (needed by) Samples Received on Ice? \_Yes \_No \_N/A Contact: Report Type Custody Seals Intact? \_Yes \_No \_N/A Telephone No.: Results Only \_Level 1 \_Level 2 \_Level 3 \_Level 4 \_EDD \_Send Report via: \_Mail \_Fax \_e-mail (address) \_Send Invoice via: \_Mail \_Fax \_e-mail (address) \_Report Type \_No: \_Agency/Program \_Sampler Signature: Sampler Phone No.: \_Agency/Program \_Agency/Program \_Sampler Signature: Sampler Phone No.: \_Agency/Program \_Age	•																		
Contact:  Contact:  Report Type  Custody Seals Intact?   Yes   No   N/A  Telephone No.:  Telephone No.:  Send Invoice via:   Results Only   Level 1   Level 2   Level 3   Level 4   EDD  Send Report via:   Mail   Fax   e-mail (address)  Project:  Location:  PO No.:  * Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  Date  Time  Date  Time  Date  Time  Time  Telephone No.:  Results Only   Level 1   Level 2   Level 3   Level 4   EDD  Compliance Monitoring?   Yes   No   N/A  Compliance Monitoring?   Yes   No   N/A  Compliance Monitoring?   Yes   No   N/A  Sampler Phone No.:  ** Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  Requested to the property of the preservative   Preser	Address:			Address:										-	Holding Time				
Telephone No.:	City, State, Zip:			City, State, Zip:						(needed by)				:	Samples Received on Ice? ☐ Yes ☐ No ☐ N/A				
Send Report via: Mail Fax e-mail (address)  Send Invoice via: Mail Fax e-mail (address)  Project: PO No.: Compliance Monitoring? Yes No Agency/Program  Sampled by (PRINT): Sampler Signature: Sampler Phone No.:  * Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  Date Time Time Preservative	Contact:			Contact:						Report Type				(	Custody Seals Intact? ☐ Yes ☐ No ☐ N/A				
Project:    PO No.:   Compliance Monitoring?   Yes   No   Agency/Program	Telephone No.:			Telephone No.:						☐ Results Only ☐ Level 1 ☐ Level 2				evel 2	2 ☐ Level 3 ☐ Level 4 ☐ EDD				
Sampled by (PRINT):  * Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  ** REQUESTED ANALYSIS*    Date   Time   Time	Send Report vi	a: Mail Fax e-m	ail (address)					Send Invoice	via:	☐ Mail ☐	] Fax	e-mail	addres	s)					
* Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)  ** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  Date Time Preservative	Project:			Location: PO No.:										<del>•</del> — —					
** Preservative Types: (1) HNO3, (2) H2SO4, (3) HCl, (4) NaOH, (5) Zinc Acetate, (6) Methanol, (7) Sodium Bisulfate, (8) Sodium Thiosulfate, (9) Hexane, (U) Unpreserved  REQUESTED ANALYSIS  Date Time Preservative	Sampled by (Pl	RINT):		Sampler Signa	ature:					Sampler P	hone	No.:							
Date Time O Freservative	** Pr			-							odiun	n Thiosulfat	e, (9) l	Hexane	, (U) Unpi	reserved	d		
Lab ID Client Sample ID Date Collected Collected Collected Time Collected Types ***  Additional Notes										REQUESTED ANALYSIS									
	Lab ID	Client Sample ID			No. of Containers	Matrix	Grab / Comp	Preservative									Additional Notes		

☐ Hazardous ☐ Non-Hazardous ☐ Radioactive Sample Disposition ☐ Dispose as appropriate ☐ Return ☐ Archive Possible Hazard Identification Comments Relinquished By (signature) Date/Time Received By (signature) Date/Time Date/Time Relinquished By (signature) Date/Time Received By (signature) Relinquished By (signature) Received By (signature) Date/Time Date/Time rev. 7/18/18 of Page

# Sample Acceptance Policy for Environmental Chemistry and Microbiology

## **Chain of Custody**

A chain of custody MUST accompany all samples received at the laboratory. The following information on the Chain of Custody must be complete: client name and address, sample collector's name, sample description/identification, matrix, date and time of collection, number of containers, preservative and requested analysis. Any missing receipt information will be documented in the final report. The laboratory will analyze those target analyses identified by the client on a project-specific basis. If project-specific information is not available, then the laboratory's default reference methods and target list of analyses will be used.

### **Sample Containers**

Upon receipt at the laboratory sample containers will be evaluated to ensure that all of the containers are intact, that the container type meets the requirement of the specific analytical method, and that the Sample Containers are properly filled.

#### **Preservatives**

Chemical preservatives are required by many analytical methods in order to render a specific analyte stable until analysis can be performed at the laboratory. Chemical preservatives are to be added AT THE TIME OF SAMPLING (either added directly or via pre-preserved bottles), unless it is unsafe to do so.

### **Transport/Receipt Temperature**

Many of the analytical methods utilized require that samples be kept cool during sample transport. Microbac will assess and document the receipt temperature of each cooler received at the laboratory. Where thermal preservation is required, the receipt temperature must be in a range of  $0.1 - 6^{\circ}$ C for environmental chemistry samples or <10  $^{\circ}$ C for environmental microbiology samples. Samples received on the same day as collection will be measured for temperature but will be evaluated based on the sample transport conditions. Samples delivered on the same calendar day as collection must be presented to the lab such that an attempt has been made to cool the samples, such as storage in a cooler on ice.

### **Holding Time**

Samples should be provided to the laboratory as soon as possible after collection to ensure that analysis can be performed within the method specified Holding Time. Upon receipt at the laboratory, the sample date and time as well as the required chemistries will be evaluated to identify if any of the samples may be past the maximum holding time.

If it is determined that a container or sample condition has been compromised, is inappropriate for the requested analysis, improperly filled, improperly preserved or received outside of the required temperature range or received with inadequate holding time available, your Microbac Project Manager will contact you for direction. Documentation of decisions made to proceed with analysis will be provided to you as part of the Cooler Inspection form in the final report.

In the absence of a written agreement to the contrary, by delivering or arranging for delivery of samples to the lab, the customer agrees to our standard terms and conditions which can be found at https://www.microbac.com/standard-terms-conditions.