H.M. PITT LABS, INC.

Chain of Custody Record

2434 Southport Way, Ste L . National City, CA 91950
Phone: (619) 474-8548 Fax: (619) 474-6128

Lab#	WO#

CUSTOMER INFORMATION	PROJECT INFORMATION
Bill To:	Sampled By: Date:
Address:	Location:
Phone:	PO #:
Fax:	Job/Claim #:

Sample #	SAMPLE DESCRIPTION	Time on	Time Off	Flow	ANALYSIS REQUESTED: Fungus: Tape	Fungus: Air	Fungus: Bulk	Fungus: Other:	Asbestos: Bulk (PLM)	Asbestos: Point Count	Asbestos: Gravimetric	Asbestos: Air	Metals: TTLC	Metals: STLC	Metals: TCLP	Metals: Pb Cd Cr Zn	Metals: 8 Metals	Metals: 17 Metals	Other				

Shipped by: ☐ Courier ☐ UPS ☐ FedEx ☐ USPS ☐ Client Drop off ☐ Other _____

Reporting Requirements: ☐ Fax ☐ PDF ☐ Excel ☐ Geotracker EDF ☐ Other _____

Sample Disposal: ☐ By Lab ☐ Return to Client: P/U or Delivery ☐ Archive until ___ /___ /___

Sample Integrity

Correct Containers:	Yes	No	N/A	Containers Preserved:	Yes	No	N/A
Custody Seals Intact:	Yes	No	N/A	Temperature at Receipt:	_____		
COC/Labels Agree:	Yes	No	N/A				
Sufficient Sample:	Yes	No	N/A	Sampled By: ☐ Client ☐ HM Pitt ☐ Autosampler			

For OTHER samples in the SAMPLE DESCRIPTION section, please specify the type of sample matrix per sample:

GW = ground water	A = air	S = solid (specify)
WW = waste water	SED = sediment	L = liquid (specify)
DW = drinking water	O = oil	Other: _____
SW = storm water	T = tissue	

Client has been informed that additional layer charges may apply___

Additional Comments:

Relinquished by:_____	Received by:_____
Date/Time:_____	Date/Time:_____
Relinquished by:_____	Received by:_____
Date/Time:_____	Date/Time:_____

Turnaround Time:

Regular: ☐ 3 to 5 days

Standard Rush: ☐ 24 Hours (Double Price)

End of Day Rush: ☐ Additional Charges May Apply