

2470 Impala Drive, Carlsbad, CA 92010 & Field Office - Signal Hill, CA W handpmg.com E info@handpmg.com

VAPOR / AIR Chain of Custody

DATE:	
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Lab Client and Project Information										Sample Receipt (Lab Use Only)											
Lab Client/Consultant:			Project Name / #:								Date Rec'd:				Control #:						
Lab Client Project Manager:			Project Location:								H&P Project #										
Lab Client Address:				Report E-Mail(s):							Lab V	Vork Or	der #								
Lab Client City, State, Zip:												Sample Intact: Yes No See Notes Below									
Phone Number:											Receipt Gauge ID:						Temp	Temp:			
Reporting Requirements Turnaroun				d Time Sampler Information								Outsid	de Lab:								
Standard Report Level III Level IV Standard (7 days			for preliminary Sampler(s):								Receipt Notes/Tracking #:										
Excel EDD Other EDD: report, 10 days for			or final report) Signature:																		
CA Geotracker Global ID:	CA Geotracker Global ID: Rush (specify):				Date:									PM Init	PM Initials:						
Additional Instructions to Laboration	atory:																				
	· · · · ,								list				su			45					
* Preferred VOC units (please choose one):									oject I - 15	TO-15	T0-15	-15m	ractio -15m	nd He	ца.	M D19]N2					
μg/Lμg/m ³ ppbvppmv						To-standard Full List VOCs Standard Full List						T0-15m	atic F □ TO	modm	A 801	ASTI					
	FIELD POINT			SAMPLE TYPE	CONTAINER SIZE & TYPE	Container ID (###)	Lab use only: Receipt Vac	ndard V	ort Lis	es S<	ene %	Gas SVm	Aromatic/Aliphatic Fractions	Leak Check Compound	Methane by EPA 8015m	Fixed Gases by ASTM D1945					
	NAME	DATE	TIME	Indoor Air (IA), Ambient Air (AA), Subslab (SS),	400mL/1L/6L Summa, Tedlar,	D (#	o use e	s Sta 82605	s Sh	Oxygenates	Naphthalene	TPHv as Gas	matic/ 8260S	k Che	hane	d Gas CO2					
SAMPLE NAME	(if applicable)	mm/dd/yy	24hr clock	Soil Vapor (SV)	Tube, etc.	= CO	Lat Re	S □	° 2 □	0×v	Nap	H	Aroi	Leal	Metl	Fixe					
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Approved/Relinquished by:		Company:	1	Date:	Time:	Received by:				1		Company	/:	1	Date	:	<u> </u>	Time:			
Approved/Relinquished by:		Company:		Date:	Time:	Received by:						Company	/:		Date			Time:			
Approved/Relinquished by:		Company:		Date:	Time:	Received by:						Company	/:		Date			Time:			