Shealy Environmental Services, Inc.
106 Vantage Point Drive
West Columbia, South Carolina 29172
Telephone No. (803) 791-9700 Fax No. (803) 791-9111
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Chain of Custody Record

Number

Client	Report to Contact	Telephone No. / E-mail	Quote No.
Address	Sampler's Signature	Analysis (Attach list if more space is needed)	Page ____ of ____
City / State / Zip Code	X _____ Printed Name		_____ Laboratory Lot Number
Project Name			
Project Number	P.O No.		

Sample ID / Description (Containers for each sample may be combined on one line)	Date	Time	G=Grab C=Composite	Matrix: Aqueous	Solid	Non-Aqueous		No of Containers by Preservative Type: Unpres.	H2SO4	HNO3	HCl	NaOH	5035 Kit											Remarks / Cooler I.D.

Turn Around Time Required (Prior lab approval required for expedited TAT)	Sample Disposal		Possible Hazard Identification (List any known hazards in the remarks)		QC Requirements
☐ Standard ☐ Rush (Please Specify)	☐ Return to Client ☐ Disposal by Lab		☐ Non-Hazardous ☐ Flammable ☐ Skin Irritant ☐ SDS provided ☐ Unknown		
1. Relinquished by	Date	Time	1. Received by	Date	Time
2. Relinquished by	Date	Time	2. Received by	Date	Time
3. Relinquished by	Date	Time	3. Received by	Date	Time
4. Relinquished by	Date	Time	4. Laboratory Received by	Date	Time

Note: All samples are retained for four weeks from receipt unless other arrangements are made.

LAB USE ONLY
Received on Ice (Check) ☐ Y ☐ N ☐ Ice Pack

Receipt Temp. _____°C