

* Complete Entire COC to be in Compliance*

RUSH Due Date _____



Chain of Custody

Client Name- _____
Project Name- _____

Sample Preserv. & Container →														
Analysis Requested →	# of Container ↓													

Accurate Work Order #	Date Sample Taken	Time Sample Taken	Matrix or Source (Refer below)	Grab (G) or Comp (C)	Client I.D. / Sample Location or DEQ / EPA Location Code	Field Results (pH, Temp, Chlorine, ...) (note analysis & units)			# of Container ↓
						Time	pH	Temp	

On-Site Info Raw Alkalinity (TOC Raw)= _____ mg/L Turbidity (E.Coli)= _____ ntu

Matrix Codes DW = Drinking Water WW = Wastewater SL = Sludge O = Other _____

E.Coli Source - GWUDI-FS= Groundwater under direct influence of Flowing Stream GWUDI-RL= Groundwater under direct influence of Reservoir/Lake

Field Instrument Calibration -				
Meter Type	Standards	Final Read.	Date , Time	Initials

Comments _____

-- All samples are scheduled to be disposed of in 4 weeks of receipt at Accurate.--

Certification by Company Official: I hereby certify that the above sampling occurred during a period such that the sample(s) is/are representative of a typical operating day discharge for the above facility. Signature : _____ Date/Time _____

Sampled By: _____ Company: _____ Sample Method: _____

Relinquished By: _____	Date/Time _____	Received By: _____	Date/Time _____
<input type="checkbox"/> Relinquished to Lab By: _____	Date/Time _____	Received at Lab By: _____	Rec'd °C _____
<input type="checkbox"/> Relq'd to Log-In Fridge By: _____			Date/Time _____

Reporting Requirements (standard 10-15 working days)	Compliance Reporting?	Yes or No (DMR, PWS,)	Oklahoma PWS ID #	RUSH Request (if available)	_____ (Working Days)
Mail Report:				Mail Invoice:	
Address				Address:	Bid # - _____
Phone #				Phone #:	PO # - _____
Email:				Fax #:	

www.accuratelabs.com (800) 516-5227	505 South Lowry Street Phone: (405) 372-5300 Stillwater, OK 74074 Fax: (405) 372-5396	3910 East 51 st Street Phone: (918) 663-5400 Tulsa, OK 74135 Fax: (918) 663-6300	12036 N. Pennsylvania Phone: (405) 751-3132 Oklahoma City, OK 73120 Fax: (405) 751-3108
--	--	--	--

Failure to complete this Chain of Custody form correctly may delay turnaround time of analytical reporting.