

# Lakeland Laboratories, LLC

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Work Order # \_\_\_\_\_

## Chain of Custody Record

Company:				Project Name: _____				Page _____ of _____								
Address:				Project #:				DEP Form #: 62-770.900(2)								
Phone: _____ Fax: _____				Project Manager: _____				Form Title: Chain of Custody Record								
P. O. #:				Project Location: _____				Effective Date: September 23, 1997								
Sampled by [Print Name(s)] / Affiliation				Preservatives (see codes)				Project Name:								
Sampler(s) Signature(s)				Analyses Requested				REQUESTED DUE DATE ____ / ____ / ____								
Item No.	Field ID No.	Sampled		Grab or Composite	Matrix (see codes)	Number of Containers	ASTM D5504-08	Requested						Remarks	Lab. No.	
		Date	Time													
1					Ambient Air	1	X								*Note: Holding time is 24 hours	
Shipment Method								<= Total Number of Containers								
Out: / /		Via:		Item No.	Relinquished by / Affiliation			Date	Time	Accepted by / Affiliation			Date	Time		
Returned: / /		Via:														
Additional Comments:																
e-mail results to:																
				Cooler No.(s) / Temperature(s) ( ° C)				Sampling Kit No.		Equipment ID No.						
				° C												
MATRIX CODES: A = Air GW = Groundwater SE = Sediment SO = Soil SW = Surface Water W = Water (Blanks) O = Other (specify)																
PRESERVATIVE CODES: H = Hydrochloric acid + ice I = Ice only N = Nitric acid + ice S = Sulfuric acid + ice O = Other (specify)																