Near North Laboratories Inc.
Environmental Testing Services

11-191 Booth Road, North Bay, ON P1A 4K3
Phone: (705) 497-0550 Fax: (705) 497-0549

Job Number		
Laboratory ID #s		
Verified By:		TAT:
Subcontract Lab / Date:		Checked ✓

CHAIN-OF-CUSTODY for NON-DRINKING WATER SAMPLES

Please Print

CLIENT: _____
ADDRESS: _____
_____
PHONE: _____
FAX: _____
EMAIL: _____
CONTACT: _____
RESULTS TO: Above ☐ Other: _____
INVOICE TO: Above ☐ Other: _____
PROGRAM NAME / NUMBER: _____

DUE DATE: Regular ☐ (approximately 10 business days)

***** RUSH:** 48 Hrs. ☐ 5 day ☐
(subject to RUSH charges, please confirm with laboratory)
Other ☐ _____

ANALYSES REQUESTED

CRITERIA (please check one)
ODWO ☐ PWQO ☐ DECOM ☐ Reg 558 TCLP ☐
SEWAGE ☐ Other:

SITE NUMBER	SAMPLE DESCRIPTION / LOCATION	SAMPLE DATE	SAMPLE TIME	am	pm															SAMPLE MATRIX: water	waste water	soil	sludge	air	other ( )	TYPE OF SAMPLE: grab	comp	# of containers	Sample Preserved? Yes	No	Field filtered for Metals? (circle one)
																															Yes / No
																															Yes / No
																															Yes / No
																															Yes / No
																															Yes / No
																															Yes / No
																															Yes / No

SAMPLER:(signature) _____

SAMPLER:(print)

Italicized analyses will be subcontracted to an outside licensed laboratory

RELINQUISHED / AUTHORIZED BY (INCLUDING SUBCONTRACTING):

NAME (signature): _____

NAME (print): _____

DATE AND TIME: AM PM

THIS SECTION FOR LAB USE ONLY:

RECEIVED AT LABORATORY BY: _____ DATE & TIME:

METHOD OF SHIPMENT: Bus / Courier / Mail / Air / Hand Delivery

INITIAL IF RECEIVED IN GOOD ORDER ☐ NUMBER OF CONTAINERS RECEIVED:_____

SHORTAGES:

COMMENTS:

COOLER #'S:_____ Client Notified Y / N

FIELD LABOUR: **MIILEAGE:** **INITIALS:**

CLIENT COMMENTS:

Repeat Bottle Order? Yes ☐ No ☐