NEW ENGLAND TESTING LABORATORY, INC.
1254 Douglas Ave.
North Providence, RI 02904
1-888-863-8522

CHAIN OF CUSTODY RECORD

PROJ. NO.	PROJECT NAME/LOCATION																	
CLIENT					AQUEOUS	SOIL	OTHER	NO. OF CONTAINERS	PRESERVATIVE	TESTS							REMARKS
REPORT TO:																	
INVOICE TO:																	
DATE	TIME	COMP	GRAB	SAMPLE I.D.													

Sampled by: (Signature)	Date/Time	Received by: (Signature)	Date/Time	Laboratory Remarks: Temp. received: _____ Cooled ❒	Special Instructions: List Specific Detection Limit Requirements:
Relinquished by: (Signature)	Date/Time	Received by: (Signature)	Date/Time		
Relinquished by: (Signature)	Date/Time	Received for Laboratory by: (Signature)	Date/Time		Turnaround (Business Days)_____