

1 Client Contact Information		Project Information					Carrier: FILL IN IF NOT IAL COURIER!!!					6 of ___ COCs													
Company:		Project Name: 2					Sampler: 4					Analysis													
Address:		Project Manger: 3					E-Mail Address: 5					Report													
City/State/Zip:		PM Signature:					Individual Preparing Canisters					Matrix													
Phone:		Site:					Name: Joseph Walukiewicz																		
FAX:		Site Contact:					Title: Air Division Employee																		
7 Analysis Turnaround Time		Invoice Information					Shipping Information																		
Standard: 2 weeks (10 business days)		PO Number:					Lab Affixed Seal Number: Filled in by lab																		
Rush: 24 hr 48 hr 72 hr 96 hr 1 wk 6 days 7 days 8 days 9 days							Date/Time Shipping Container Sealed: filled in lab																		
8		Start Time & Date (24 Hr clock)	End Time & Date (24 Hr Clock)	Starting Canister Pressure in Field (" Hg)	Ending Canister Pressure in Field (" Hg)	Starting Interior Temp. (F)	Ending Interior Temp. (F)	Outgoing Canister Pressure in Lab (" Hg)	Incoming Canister Pressure in Lab (" Hg)	Flow Regulator ID	Canister ID	Canister Size (L)	Flow Controller Readout (cc/min)	EPA TO - 15	NJDEP LLTO-15	Library Search	Other (Explain Below)	NJDEP Regulatory Data Package	NJDEP Reduced Data Package	NY DEC / DOH Data Package	Results Only (No Data Package)	Indoor / Ambient Air	Soil Gas / Sub or Near Slab	Landfill	Stack Emissions
														pick analysis type. LLTO-15 N/A at this time. If "Other", explain in "Special Analysis"									pick one matrix type per sample (will expedite TAT)		
															pick one report type										
Barometric Pressure		General Comments:					Laboratory Canister Certification																		
Start	9																								
Stop												GC/MS Analyst Signature (TO-15/LLTO-15): _____													
Special Analysis Instructions / QC Requirements:																									
												Please use appropriate care with IAL sampling equipment when sampling and packing for shipment. The client is responsible for all damage incurred to IAL equipment. Please notify IAL if equipment is damaged upon receipt.													
10		External Chain of Custody																							
Relinquished laboratory sample custodian		Sample receiver / field sampler		Time/Date		Reason for Change of External Custody																			
Sample receiver / field sampler						shipment from laboratory to client																			
		laboratory sample custodian																							
		Sample receiver / field sampler																							
Individual Resealing Shipping Container Name:							Title:																		
Time/Date Sample Shipping Container Resealed:							NJDEP Affixed Seal Number:																		
Time/Date Sample Shipping Container Opened:							Individual Opening Sample Shipping Container: Joseph Walukiewicz																		
Time/Date Internal Chain of Custody Initiated:																									

White and yellow - lab copies; Pink - client copy

Key:

Boxes in yellow

Must be filled out

Boxes in blue

Required for most, but not all, sampling events

- ❶ Company name, full address, phone number, and fax number is required.
- ❷ Project name is required. Site location is optional, additional information
- ❸ Project manager must be named and his/her signature must be on the chain of custody. NO INTIALS!
- ❹ Sampler Name
- ❺ Project manager e-mail
- ❻ Number of COCs sent to the lab - allows for better sample tracking
- ❼ Turn-around-time must be indicated. No TAT will be assumed
- ❽ All areas in yellow must be completed. Other areas ("Starting/Ending canister pressure in field", "Flow Regulator ID", "Flow Controller Readout") are not applicable for grab samples, BUT must be completed if a flow controller is being used.
- ❾ Highly recommended. Historical barometric pressures are available online. NOTE: When obtaining the barometric pressure reading online from a nearby National Weather Service station, the station value (which is the absolute barometric pressure) shall be requested and an adjustment for elevation differences between the weather station and sampling point shall be made at a rate of minus 2.5 mm Hg (0.1 in.) per 30 m (100 ft) elevation increase or plus 2.5 mm Hg (0.1 in) per 30 m (100 ft) elevation decrease.
- ❿ COCs must be signed (with full signatures) upon sample receipt and relinquishing. Also, when (or right before if the COC is being put in the box), the person sealing the box must sign and date the COC.