

37575 W Huron River Drive Romulus, Michigan 48174 (734) 955-6600 Fax: (734) 992-2261

## **Chain of Custody**

|  | Fax: (734) 992-2261 | 1  |  |                               |                |                       |         |
|--|---------------------|--|--|-------------------------------|----------------|-----------------------|---------|
| Lau :                                      | www.2etl.com        | 1  | ETL Project #:                                       |                               |                |                       |         |
| Client:                                    |                     | Contact:   | Project Location/Name                                | ::                            |                |                       |         |
|  |                     | Phone:   |  |                               |                |                       |         |
| Address:                                   |                     | Fax:   |  |                               |                |                       |         |
|  |                     | E-mail:  | Client Project #:                                    |                               |                |                       |         |
| Please Provide Res                         | sults: Email        | Fax Verbal Other   | Date Sampled:  |                               |                |                       |         |
|  |                     | naround Time (TAT): RUSH (2 hrs) Same Day d, standard TAT will be assumed) TAT Based on Business Hours Monday-Friday   *Rush |  | hrs Standard (5 day           |                |                       |         |
|  |                     | Sample Type (Check C   | only One)  |                               |                |                       |         |
| Asbestos                                   | : Bulk (PLM)        | Bulk (TEM) Dust Air (PCM) Air (TEM)  | Mold: Tape Bu  | ılk Air-O-Cell Air            | (Other)        | Nuisance              | a Dust  |
| Combust                                    | ion Tape: Basic     | c: Total Combustion Particles Advanced: Soot/Char/Ash  | % 3M® Scotch™  | Magic Tape is <u>required</u> | for combustion | n analysis            |         |
|  | _                   | Asbestos Analysis Information (  |  |                               |                |                       |         |
| Stop at :                                  | 1st Positive: Yes   | s / No (Clearly mark each homogeneous area)  | Point Counting: ☐Yes /☐No ☐*400 Points ☐*1000 Points |                               |                |                       |         |
| L  | *Gravimetric Red    |  |  |                               |                |                       |         |
|  |                     | * Additional charge and turnard  | und may be required                                  |                               |                |                       |         |
| Lab ID Sample ID                           |                     | Sample Location/Time Sampled   | Material or Sample Description                       |                               |                | Air Samples<br>t Stop | Volume  |
|  |                     |  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | /  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | /  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     |  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     |  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     |  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / DM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     | AM / PM  |  |                               |                |                       |         |
|  |                     |  |  | Date                          |                | ime                   |         |
| Relinquished (Name/Organization):          |                     |  |  |                               |                |                       | AM / PM |
| Received (Name/ETL):                       |                     |  |  |                               |                |                       | AM / PM |
| Stereoscopical/Sample Analysis (Name/ETL): |                     |  |  |                               |                |                       |         |
| Special Instructions:                      |                     |  |  | Remarks:                      |                |                       |         |
|  |                     |  |  |                               |                |                       |         |

<sup>\*\*</sup>In order to ensure results by specified TAT, the lab must be emailed/called with the quantity of samples to be shipped or dropped off

<sup>\*\*</sup>Rushes are not accepted after 3:00 PM and Same Days are not accepted after 2:00 PM