

QF-930-001 Laboratory Chain of Custody

Certificate Number: _____ (Completed by Laboratory)

Section A – Company/Person Details

Company Name:		Email:	
Contact Person:		Phone/Mobile:	
Office Address:			
Sample Submitted By Signature:		Received By Signature:	
Date:		Date:	
Time:			

Section B– Sample Site Details

Site Address:	
Client Reference/project:	PO number:
PCL Job Number:	Internal <input type="checkbox"/> External <input type="checkbox"/>

Section C – Sample Turn Around Requirements

Bulk ID:	Standard (24h) <input type="checkbox"/>	Urgent <24h <input type="checkbox"/>	
PA Soils:	Standard (3 days) <input type="checkbox"/>	Priority (2 Days) <input type="checkbox"/>	Urgent (Depends on # of samples) <input type="checkbox"/>
Quant Soils 10L (WA):	Standard (5 days) <input type="checkbox"/>	Priority (3 Days) <input type="checkbox"/>	Urgent (Depends on # of samples) <input type="checkbox"/>
Semi-Quant Soils (BRANZ):	Standard (5 days) <input type="checkbox"/>	Priority (3 Days) <input type="checkbox"/>	Urgent (Depends on # of samples) <input type="checkbox"/>

Section D – Payment Method

Cash <input type="checkbox"/>	Payment Express <input type="checkbox"/>	Account <input type="checkbox"/>	COD <input type="checkbox"/>
Payment Received: Yes <input type="checkbox"/>		No <input type="checkbox"/>	

Section E – Sample Summary

Sample ID	Bulk	PA Soil	Semi-Quant	Quant Soil	Wipe/Tape	Other	Sample Location, Description and Notes

SECTION F - Sample Submitted to: (Update if sample is transferred internally)

Christchurch <input type="checkbox"/> 4/91 Byron Street Sydenham, Christchurch 8023	Dunedin <input type="checkbox"/> 186 Macandrew Road, South Dunedin 9012	Auckland <input type="checkbox"/> Unit 1, 30 Greenpark Road, Penrose, Auckland 1061	Wellington <input type="checkbox"/> Level 2, 10 Hutt Road Petone, Wellington 5012
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Report Checked By: _____ Date _____ Report Sent By _____ Date _____