

Chain of Custody  
 Environmental Testing & Training NorthWest  
 2345 McGilchrist Street SE Suite #5 Salem, OR 97302  
 317 Goodpasture Island Road Suite #F Eugene, OR 97401  
 971.303.TEST (8378)

<b>Client Name &amp; Address:</b>		<b>Client No:</b>	<b>PO / Job#:</b>	<b>Date:</b>
<b>Turn Around Time: Rush / 1Day / 2Day / 3Day / 4Day / 5Day</b>				
<input type="checkbox"/> PCM:				
<input type="checkbox"/> PLM:				
<b>Contact:</b>			<input type="checkbox"/> TEM Air: <input type="checkbox"/> TEM Bulk:	
Phone:	Fax:		<input type="checkbox"/> Radon Test	
E-mail:			<input type="checkbox"/> Mold <span style="float: right;"><input type="checkbox"/> Special Project</span>	
Resident Name:			<input type="checkbox"/> Metals Analysis:	
Site Address:			_____	
City - State:			<b>Report Via:</b> <input type="checkbox"/> Fax <input type="checkbox"/> E-Mail <input type="checkbox"/> Verbal	

Sample ID	Date / Time	Sample Location / Description	FOR AIR SAMPLES ONLY				Sample Area / Air Volume
			Type	Time On/Off	Avg. LPM	Total Time	

Sampled By:		Date:	Time:
Shipped Via: <input type="checkbox"/> Fed Ex <input type="checkbox"/> DHL <input type="checkbox"/> UPS <input type="checkbox"/> US Mail <input type="checkbox"/> Courier <input type="checkbox"/> Drop Off <input type="checkbox"/> Other:			
Relinquished By: Print Name:	Relinquished By: Signature:	Date / Time:	
Received By:	Received By:	Received By:	
Date / Time:	Date / Time:	Date / Time:	
Condition Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Condition Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Condition Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No	