



**SCIENTIFIC  
METHODS**

## Chain of Custody

12441 Beckley Street • Granger, Indiana 46530  
574.277.4078 [Phone] • www.scientificmethods.com

Client Name		Reporting Address					PWSID #			
Phone		Email		Purchase Order	Billing Address					
SM Lab Number	Collection Date	Collection Time	Sampling Location	Test Requested	Preferred Method	Compliance (Yes / No)	Sample Volume	Water / Matrix Type	Preservative	Temp at Receipt
									Yes / No Type:	
		AM / PM							Yes / No Type:	
		AM / PM							Yes / No Type:	
		AM / PM							Yes / No Type:	
		AM / PM							Yes / No Type:	
		AM / PM							Yes / No Type:	
		AM / PM							Yes / No Type:	
<b>Field Comments:</b>					<b>CI2 Check</b>	<b>Water / Matrix Type Code</b>		<b>Answer the following questions if the sample is ground / well water.</b>		
					Yes / No / NA			Has your well been shocked recently? Yes / No		
<b>Lab Comments:</b>					<b>Samples Iced</b>			If yes, how long ago?		
					Yes / No			Was your system properly flushed afterwards?		
					Free:					
					Total:					
<b>Signature</b>			<b>Print Name</b>			<b>Date</b>	<b>Time</b>			
<b>Sampled By:</b>										<b>Instructions:</b> Please fill out name, addresses, email, phone number, PO if applicable, collection date & time, sample location, test you are requesting, preferred method for testing IF known, if sample is in compliance for any regulation, water or matrix type using the provided code, answer questions if a well is involved, sign, date, and list time at the bottom of the chain before sending the sample(s) to Scientific Methods.
<b>Released By:</b>										
<b>Ship By:</b>										
<b>Received By:</b>										