LABORATORY CHAIN-OF-CUSTODY RECORD

Greenway Engineering, Inc.
Environmental Services Department
Environmental Laboratory
151 Windy Hill Lane
Winchester, VA 22602
Phone: (540) 662-4185 **Fax**: (540) 722-9528 **Email**: wetlab@greenwayeng.com www.greenwaywetlab.com

See reverse for order form.

Samples are accepted Monday-Friday 8am – 5pm. **COLIFORM/BACTERIA SAMPLES NOT ACCEPTED ON FRIDAYS.**

Please visit our video tutorial for coliform sample collection by clicking "How to take a sample or coliform analysis" at www.greenwaywetlab.com

Owner Name and Address of Sampling Site	**Sampling Date & Time**	**LABORATORY CLIENT ID:** (Greenway Use Only) **LAB** _ _ _ _ _ _ _ **Payment Type:** _____ $_____
	Sampler (signature)	**Sample Source** (kitchen tap, outside faucet, etc.)
Contact Name and Mailing Address (if different)		**Type (circle):** (Potable Well) (Public Water) (Surface Water) (Wastewater) (Other) list:
	Sampler (print)	
Contact Phone:		**If Potable Well, was the well shocked?** Yes☐ No☐ **Aerator screen removed & faucet sterilized?** Yes☐ No☐ **Is the water source always chlorinated?** Yes☐ No☐
Property Tax ID #: (if report needs sent to an agency, such as Helath Dept.)	**Compliance sample?** (Need to go to Health Dept?) Yes☐ No☐ If yes, what county? _____ Contact? _____	

Relinquished by (signature)	**Date/Time (at lab)**	**Received by** (signature)	**Date/Time**
Relinquished by (signature)	**Date/Time**	**Received by** (signature)	**Date/Time**
Relinquished by (signature)	**Date/Time**	**Received in Laboratory by** (signature)	**Date/Time**

Email Results? Y N **Turnaround Request:** Standard☐ Priority*☐ **Next Day Coliform** ☐ **(add $10)**
Email: **Requested Due Date:** ***Priority samples have cost multipliers. See price sheet.**

GREENWAY ENGINEERING USE ONLY

Sample ID	Sample Time	Container Type/Size	# Bottles Submitted & Grab or Composite	Preserv.	pH (SU)	Temp (C)	FCl2 (ppm)	Analyses Requested (list)	Notes / Comments
		100 mL sterile	G - 1	Na2S2O3				Total Coliform & E. coli (P/A)	
		100 mL non-sterile	G - 1	Na2S203				pH, temperature, FCl2	

Observations and Comments

Samples Received in cooler on ice? Y N **Type of Ice** (circle): Wet Blue None **All temps <4 or 10C?:** Y N (as applicable)
Were samples delivered immediately after collection and had the cooling process began? Y N **Circle N here:** Y N
Were samples collected in correct type of sampling container? Y N **Were the containers Greenway-provided?** Y N
Short hold-time analysis? (<72 hour) Y N **COC complete?** Y N **Properly preserved?** Y N **Labels match COC?** Y N