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CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

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Client:		PO No.		ANALYSES REQUESTED										AIC CONTROL NO:	
Project Reference:		SAMPLE MATRIX												AIC PROPOSAL NO:	
Project Manager:		W A S												NO OF BOTTLES	
Sampled By:		G R A B		C O M P		Received on Ice (4°C)?		Remarks							
AIC No.		Date/Time Collected		NO = none		YES NO									
				NO = Sulfuric acid pH2											
				P = Plastic											
				S = Nitric acid pH2											
				V = VOA vials											
				N = NaOH to pH12											
				H = HCl to pH2											
				B = Zinc acetate											
				T = Sodium Thiosulfate											
				Z = Zinc acetate											
Container Type				Relinquished		Date/Time		Received		Date/Time					
Preservative				By:				By:							
				Relinquished		Date/Time		Received in Lab		Date/Time					
				By:				By:							
				Comments:											
Turnaround Time Requested: (Please circle)															
NORMAL or EXPEDITED IN _____ DAYS															
Expedited results requested by:															
Who should AIC contact with questions:															
Phone:															
Fax:															
Report Attention to:															
Report Address to:															