## CHAIN OF CUSTODY www.eurofinsus.com/Built



SAMPLE TYPE CODES

D - Dust

SO - Soil

O - Other:

CP - Contact Plate

NP - Non-Potable Water

SW - Swab

B - Bulk

**Built Environment Testing** 

East: (866) 871-1984 Central: (800) 651-4802 West: (866) 888-6653

BC - BioCassette ™

**SAS** – Surface Air Sampler **P** – Potable Water

A1S - Anderson

## Water, Bulk, Dust, Soil, Contact Plates **CONTACT INFORMATION** Company: Address: Sulfate Reducing Bacteria (Presence / Absence) Special Instructions: Contact: Total Coliform, E. coli (Presence/Absence) Membrane Filtration (specify organism) Phone: Count Iron Bacteria (Presence/Absence) **TURN AROUND TIME CODES (TAT)** PROJECT INFORMATION MPN Bacteria (specify organism) **Bacterial Total** QuantiTray - Sewage Screen STD - Standard (DEFAULT) Project ID: Thermophilic actinomycetes Rushes received after 2pm Heterotrophic Plate Count Gram Stain and Counts Slime Forming Bacteria Project or on weekends, will be ND - Next Business Day\* Description: considered received the Project Sampling next business day. Please \*Must be received by 5pm. Legionella ISO alert us in advance of Zip Code: Date & Time: Available for Total Coliform - E. Culturable Air 5-Species ID 3-Species ID 5-Genus ID weekend analysis needs. coli P/A, Iron Bacteria P/A, and 3-Genus ID PO Number: Sampled By: QuantiTray - Sewage Screen Sample Type TAT Total Volume / Area Notes Sample ID Description (Below) (Time of day, Temp, RH, etc.) (Above) (as applicable)

By submitting this Chain of Custody, you agree to be bound by the terms and conditions set forth at: https://www.eurofinsus.com/environment-testing/built-environment/resources/sampling-guides-and-forms/
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**RELINQUISHED BY** 

DATE & TIME

**DATE & TIME** 

RECEIVED BY

**BACTERIAL ANALYSIS** 

**REQUESTED SERVICES** (Check boxes below)

Air and Surface Samples

BioCassette™, Andersen, SAS, Swab,