Notes: Rush (Yes or No) Relinquished By Relinquished By Sampled By Phone: Contact: 221 State Street Station #12 Phone (207) 287 – 2727 e-Mail address: Address: Company: Health and Environmental Testing Lab Sample iD Augusta, ME 04333-0012 Fax (207) 287-1884 Sample time Date/Time Fax Results (Yes or No) Date/Time Date/Time Preservation Container vol Container type Phone: Address: Bill To: e-Mail address: Appropriation/PO# Quantity Received By Received By Received By Grab or Composite Matrix: Ground Water Waste Water Drinking Water Solids Other Custody seal intact (Yes or No) Fax: Analyses Required Date/Time Date/Time Date/Time Phone: Address e-Mail address Copy To: Temperature on Arrival Compliance sample Project Name: Town/County: Sample Date: Fax: HETL Number **≺** z

State of Maine

Chain - of - Custody

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