

CHAIN OF CUSTODY FORM

Client Reference:	Laboratory Reference:	Date:	Sampled by:
Your Address:			Transported by:
Your Address: Company submitted by: Site Address: Telephone No: Email: reports@ieclabs.com.au Sample number Sample type Sample location AOC / BT / SA AOC / BT / SA	Submitted to: <u>IECL INTERNATIONAL PTY LTD</u>		
			Condition on Receipt:
Telephone No:	Email: <u>reports@ie</u>	eclabs.com.au	· · · · · · · · · · · · · · · · · · ·
Sample number	Sample type Sample location		Date Flow Rate Sampling time Analysis requeste
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
	AOC / BT / SA		G/SC/E/O
Comments:			
AOC – Air O Cell	G – Identification to genus		Relinquished by: Date:
BT – Bio Tape	SC – Soot and Charcoal		Time:
SA – Surface Air	E – E. Coli		Received by: Date:
	O- Other:		Time:

Phone: 1300 032 004

Please return this form with samples to: 3/33 Miller Street, Murarrie Qld 4172

January 2020

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