

C.A. Labs, LLC. 12232 Industriplex Suite 32 Baton Rouge, LA 70809

Phone: 225-751-5632 Fax: 225-751-5634 Mobile: 225-993-3471

## **Chain of Custody**

| Client Name:                      |         |                                |                     | CA           | Lal               | bs job #          | CBR                  |                   |               |
|-----------------------------------|---------|--------------------------------|---------------------|--------------|-------------------|-------------------|----------------------|-------------------|---------------|
| Client Address:                   |         |                                |                     |              |                   | Address:          |                      |                   |               |
| Chem Address                      | s.<br>  |                                |                     |              | _                 |                   |                      |                   |               |
|                                   |         |                                |                     | (11          | аше               | rent)             | -                    |                   |               |
| nhono numbo                       |         |                                |                     |              |                   |                   |                      |                   |               |
| phone number:                     |         |                                |                     | ad D         | ononto to:        |                   |                      |                   |               |
| fax number:                       |         |                                |                     |              |                   | eports to:        | -                    |                   |               |
| Project Number:  Contact:         |         | Project Name:  Reports Results |                     |              |                   |                   |                      |                   |               |
|                                   |         |                                |                     |              | oru               | VIA:              | EMAIL_               | FAX               | VERBAL        |
| Total # Samples Submitted:        |         |                                | d: Total # Sa       | amples to    | be A              | nalyzed           | Material Matrix:     |                   |               |
|                                   |         |                                |                     | _            |                   |                   |                      | Air / Bulk / V    |               |
| Asbestos:                         |         |                                | please o            | all ahead fo | r ava             | ailability of     | all rush ar          | nd/or after ho    | ours samples. |
| TEM                               |         |                                |                     | LM           | TA Time           |                   | Optical / IAQ        |                   | TA Time       |
| Circle analysis and TA            | time    | Circle analysis a              |                     | nd TA time   | 2 hour            |                   | Allergen Particle:   |                   | 2 hour        |
| AHERA                             |         | 4 hour                         | Improved            | Improved     |                   | our               | tape/bulk/swab       |                   | 4 hour        |
|                                   |         | 8 hour                         | Interim             |              | 8 hour            |                   | Cyclex-d cassettes   |                   | 8 hour        |
|                                   |         | 16 hour                        |                     |              | 16 hour           |                   | Air-o-cell cassettes |                   | 16 hour       |
| =                                 |         | 24 hour                        | AHERA               | AHERA        |                   | hour              | Anderson cultures    |                   | 24 hour       |
| -                                 |         | 2 days                         |                     |              | 2 days            |                   | Bulk/swab cultures   |                   | s 2 days      |
| NIOSH 7402 3 days                 |         | Point Cou                      | Point Count -       |              | lays              | Bacteria cultures |                      | 3 days            |               |
|                                   |         | 5 days                         | (NESHAP             | S)           | 5 days I          |                   | PCM: NIOSH 7400      |                   | 5-10 days     |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
| _ead: Circle analysis and TA time |         |                                |                     |              |                   |                   |                      |                   |               |
| Matrix:                           | -       |                                | Soil                |              |                   | Wipes             |                      | astewater         | TCLP          |
| TA Time:                          | 8       | hour                           | 1 day               | 2 days       |                   | 3 days            |                      | 5 days            | 6-10 days     |
| Sample Informat                   | ion.    |                                |                     |              |                   |                   |                      |                   |               |
| Sample Num                        |         | Sample Location:               |                     |              | Sample Date       |                   | te/Time              | Sample Volume (L) |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
| data\wordpro\forms\               | Chainof | Custody.lwp                    | Revision 2          | 3/12/01      | Pa                | ge 1              |                      |                   |               |
|                                   |         |                                |                     |              |                   |                   |                      |                   |               |
| Custody Informa                   |         |                                |                     |              | _                 |                   |                      |                   |               |
| Samples relinqu                   | iished: |                                |                     |              | Samp              | oles received     |                      |                   |               |
|                                   |         | Si                             | gnature / Date / Ti |              | _                 | _                 |                      | Signature / Da    | ate / Time    |
| Samples relinquished:             |         |                                |                     |              | Samples received: |                   |                      |                   |               |
|                                   |         | Siş                            | gnature / Date / Ti | me           |                   |                   | ļ                    | Signature / Da    | ate / Time    |



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After hours Mobile: 225-993-3471

| Client Name:               |                                    | CA Labs job # CBR |                |                         |  |  |  |  |
|----------------------------|------------------------------------|-------------------|----------------|-------------------------|--|--|--|--|
| Client Address:            | Billing Address:                   |                   |                |                         |  |  |  |  |
|                            |                                    | if differen       |                |                         |  |  |  |  |
| phone number:              |                                    | <u> </u>          | <del></del>    |                         |  |  |  |  |
| fax number:                |                                    | Send Reports to:  |                |                         |  |  |  |  |
| Project Number:            |                                    | Project Name:     |                |                         |  |  |  |  |
|                            |                                    | _<br>Reports I    |                |                         |  |  |  |  |
| Contact:                   | ·                                  | -                 | VIA: EMAIL     |                         |  |  |  |  |
| Sample Number:             | Sample Location:                   | Samp              | ole Date/Time: | Sample Volume (I        |  |  |  |  |
|                            |                                    |                   |                |                         |  |  |  |  |
|                            |                                    |                   |                |                         |  |  |  |  |
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|                            |                                    |                   |                |                         |  |  |  |  |
|                            |                                    | •                 |                |                         |  |  |  |  |
| For internal use:          | ling project ( indicate yes by cho | ockina lino \     |                |                         |  |  |  |  |
| Any initial changes regard | ing project ( indicate yes by cit  | ecking inte /     | <del></del>    |                         |  |  |  |  |
|                            |                                    |                   |                |                         |  |  |  |  |
| Custody Information:       |                                    |                   |                |                         |  |  |  |  |
| Samples relinquished:      |                                    | Samples re        | eceived:       |                         |  |  |  |  |
| _                          | Signature / Date / Time            |                   | Sig            | Signature / Date / Time |  |  |  |  |
| Samples relinquished:      |                                    | Samples re        | eceived:       |                         |  |  |  |  |
| _                          | Signature / Date / Time            |                   | Sig            | gnature / Date / Time   |  |  |  |  |