



MONTANA ENVIRONMENTAL LAB, LLC
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Chain Of Custody and Analytical Request Record

Please Print. Provide as much information as possible

Company Name:	Project Name, PWSID #, Permit #, Etc.
Report Address:	Contact Name, Phone, Fax: Invoice Contact & Phone #:
Invoice Address:	Purchase Order #

TURN AROUND TIME REQUIRED

STANDARD 10 WORKING DAYS

5 WORKING DAYS (50% SURCHARGE)

1-2 WORKING DAYS (100% SURCHARGE)

OTHER _____

SAMPLER PRINTED NAME AND SIGNATURE:	Analysis Requested				COMMENTS
	SITE NAME or LOCATION	SAMPLE DATE	SAMPLE TIME	MATRIX*	

Custody Record MUST be Signed	Relinquished by: _____	Date/Time: _____	Shipped by: _____	Received by: _____	Date/Time: _____
	Relinquished by: _____	Date/Time: _____	Shipped by: _____	Received by: _____	Date/Time: _____
	Relinquished by: _____	Date/Time: _____	Shipped by: _____	Received by: _____	Date/Time: _____

NET 30 DAYS: 1.5% PER MONTH INTEREST CHARGE (18% A.P.R.) CUSTOMER AGREES TO PAY COLLECTION COSTS AND ATTORNEY'S FEES.

LAB USE ONLY:

INSTRUCTIONS

1. USE ONE LINE PER SAMPLE.
2. BE SPECIFIC IN TEST REQUESTS
3. CHECK OFF TESTS TO BE PERFORMED FOR EACH SAMPLE

LOGIN COMMENTS: _____ _____ _____	SAMPLES CHECKED/LOGGED IN BY: _____ SAMPLE TEMP, RECEIPT AT LAB: _____ (Compliance: 4 +/-2°C) SAMPLES RECEIVED DAY OF COLLECTION? <input type="checkbox"/> (check for yes) BLUE ICE: FROZEN _____ PARTIALLY FROZEN _____ THAWED _____
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