Chain of Custody / Sample Log
Bulk Asbestos

9000 Commerce Parkway
Suite B
Mt. Laurel, NJ 08054
Toll Free: 877 428-4285
info@iatl.com
www.iatl.com

Client: _____ **Project Name:** _____
_____ **Project No.:** _____
_____

Office Phone: _____ **Contact 1:** _____
Cell Phone: _____ **Contact 2:** _____
FAX / Email 1: _____ **FAX / Email 2** _____

Special Instructions: _____
_____

Matrix:

☐ Air ☐ Soil ☐ Bulk ☐ Other _____
☐ Water ☐ Paint ☐ Surface Dust / Wipe _____

Analysis Method:

☐ PLM : Bulk Asbestos Building Materials EPA 600 / R 93-116

☐ PLM : Point Counting
- ☐ PC : via ELAP 198.1
- ☐ PC : 400 Points
- ☐ PC : 800 Points *
- ☐ PC : other _____ Points *

☐ PLM : Gravimetric Reduction
- ☐ PLM : NOB via 198.6
- ☐ PLM : Friable via EPA 600 2.3
- ☐ If <1% by PLM, to TEM via 198.4 *
- ☐ If <1% by PLM, Hold for Instructions

☐ PLM : Analyze Until Positive (Positive Stop)
- ☐ AUP : by Homogenous Area as Noted
- ☐ AUP : by Material Type as Noted

☐ PLM : Non-Building Material *, **(Dust, Wipe, Tape, Soil)
- ☐ Soil or Vermiculite Analysis *, **

☐ PLM: Instructions for Multi-Layered Samples
- ☐ Analyze and Report All Separable Layers per EPA 600
- ☐ Report Composite for Drywall Systems per NESHAP
- ☐ Report All Layers and Composite Where Applicable
- ☐ Only Analyze and Report Specifically Noted Layer

* Additional charge and turnaround may be required. ** Alternative Method (ex: EPA 600/R-04/004) may be recommended by Laboratory.

Turnaround Time:

Preliminary Results Requested By… _____ ❑ Verbals ❑ FAX ❑ Email
date / time

☐ 10 Day ☐ 5 Day ☐ 3 Day ☐ 2 Day ☐ 1 Day* ☐ 12 Hour** ☐ 6 Hour** ☐ RUSH**

* End of next business day unless otherwise specified. ** Matrix Dependent. Please notify the lab before shipping.

Sample Numbers:

Client #(s): _____ (start) - _____ (end) iATL#(s): _____ (start) - _____ (end) Total: _____

Please use your sample log to supply sampling information (ex. Volumes, areas, descriptions, locations, etc.) or download forms at iatl.com

Chain of Custody:

Relinquished (Name / Organization):	Date:	Time:
Received (Name / iATL):	Date:	Time:
Sample Login (Name / iATL):	Date:	Time:
Sample Prep (Name / iATL):	Date:	Time:
Analysis(Name(s) / iATL):	Date:	Time:
QA/QC Review (Name / iATL):	Date:	Time:
Archived / Released: _____ QA/QC InterLAB Use: _____	Date:	Time:

iATL INTERNATIONAL
ASBESTOS TESTING LABORATORIES

Chain of Custody / Sample Log
Bulk Asbestos

9000 Commerce Parkway
Suite B
Mt. Laurel, NJ 08054
Toll Free: 877 428-4285
info@iatl.com
www.iatl.com

Client: _____ **Project Name:** _____
_____ **Project No.:** _____

Sampling Date: _____

Client Sample ID:	iATL Sample ID:	Sample Description / Location	Notes

Chain of Custody / Sample Log
Bulk Asbestos

9000 Commerce Parkway
Suite B
Mt. Laurel, NJ 08054
Toll Free: 877 428-4285
info@iatl.com
www.iatl.com

Client: _____ **Project Name:** _____
_____ **Project No.:** _____

Client Sample ID:	iATL Sample ID:	Sample Description / Location	Notes

Please Make Additional Copies As Needed

eMail to: