

Chain of Custody - Lead (Pb) in Potable Water by EPA 200.9

Client NYS OCFS		OCFS Provider ID		Sample Date	Notes (For Lab Use) Acidified: _____ Date _____ By: _____ Initials _____
Facility Name		Facility Address			
Collector Name:					
Turnaround	15 Days				
Sample #.	Location and/or Sample Description	Time of Collection	# and Type of Container	Preservative (if any)	
			1x250mL	None	

Provider Name: _____ Provider Signature: _____ Date: _____ Time: _____

Lab Use Only:

Received : _____ Signature: _____ Date: _____ Time: _____

NYEA Project No.	Temp. _____ °C	Analyst Initials	Analysis Date:
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