



CHAIN OF CUSTODY FORM

2556 W Woodland Dr Anaheim, CA 92801

Phone:(562) 860-2201
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Lab Batch Number:		Number Of Samples:	
Client Name:		Project Number:	
Client Address:		Project Location:	
Project Manager:		Turnaround Time:	<input type="checkbox"/> 1 hour <input type="checkbox"/> 24 hours <input type="checkbox"/> 2 hours <input type="checkbox"/> 2 days <input type="checkbox"/> 4 hours <input type="checkbox"/> 3 days <input type="checkbox"/> 8 hours <input type="checkbox"/> 5 days
Main Phone:	Ext:		<input type="checkbox"/> Rush
Cell Phone:			
Email:		Delivery:	Ref#:
Fax:		Reporting Method:	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Call Main Phone <input type="checkbox"/> Fax
Special Instructions:			
Analysis Type:	Flame AA Lead Analysis: <input type="checkbox"/> Lead Air (NIOSH 7082) <input type="checkbox"/> Lead Paint (EPA 7420) <input type="checkbox"/> Lead Wipes (3050/7420) <input type="checkbox"/> Lead Soil (7420) Microbial (Mold) Analysis: <input type="checkbox"/> Mold Bulk <input type="checkbox"/> Mold Spore Trap		

Seq#	Client Sample ID	A/R	Description / Location / Comments
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

	Print Name	Signature	Company	Date	Time
Sampled by:					
Relinquished by:					

(-----For Lab Use Only-----)

	Print Name	Signature	Company	Date	Time
Received by:			AIH Laboratory		
Analyzed by:			AIH Laboratory		
Reported by:			AIH Laboratory		