

Regulatory Program:  DW  NPDES  RCRA  Other:

Client Contact		Project Manager: <u>Shen Fama</u>		Site Contact:		Date: <u>6/1/18</u>		COC No:	
Company Name: <u>DUKE PONTIN</u>		Tel/Fax:		Lab Contact:		Carrier:		_____ of _____ COCs	
Address: <u>66-532 KAM HWY</u>		Analysis Turnaround Time <input type="checkbox"/> CALENDAR DAYS <input type="checkbox"/> WORKING DAYS TAT # different from Below _____ <input checked="" type="checkbox"/> 2 weeks <input type="checkbox"/> 1 week <input type="checkbox"/> 2 days <input type="checkbox"/> 1 day							
City/State/Zip: <u>HALEIWA HI 96712</u>									
Phone: <u>305 923 5458</u>									
Fax:									
Project Name: <u>44020435</u>									
Site: <u>66-532 KAM HWY</u>		P O #		Filtered Sample (Y/N)		Perform MS / MSD (Y/N)		Sampler:	

Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=Grab)	Matrix	# of Cont.	Filtered Sample (Y/N)	Perform MS / MSD (Y/N)	610B	8270C	915A	8260B	CHLORINATED	SOLVENTS	TOTAL PCB'S	Sample Specific Notes
<u>I</u>	<u>5/31/18</u>	<u>3PM</u>	<u>G</u>	<u>SOIL</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	
<u>2A</u>	<u>↓</u>	<u>3PM</u>	<u>G</u>	<u>↓</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	
<u>2B</u>	<u>↓</u>	<u>3PM</u>	<u>G</u>	<u>↓</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	
<u>2</u>	<u>↓</u>	<u>3PM</u>	<u>G</u>	<u>↓</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	
<u>2A</u>	<u>↓</u>	<u>3PM</u>	<u>G</u>	<u>↓</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	
<u>2B</u>	<u>↓</u>	<u>3PM</u>	<u>G</u>	<u>↓</u>	<u>1</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	<u>✓</u>	

Preservation Used: 1= Ice, 2= HCl; 3= H2SO4; 4=HNO3; 5=NaOH; 6= Other \_\_\_\_\_

Possible Hazard Identification: \_\_\_\_\_

Are any samples from a listed EPA Hazardous Waste? Please List any EPA Waste Codes for the sample in the Comments Section if the lab is to dispose of the sample.

Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown

Sample Disposal ( A fee may be assessed if samples are retained longer than 1 month )

Return to Client  Disposal by Lab  Archive for \_\_\_\_\_ Months

Special Instructions/QC Requirements & Comments:  
Received on ice 5.4C/5.4C IR-93

Custody Seals Intact: <input type="checkbox"/> Yes <input type="checkbox"/> No	Custody Seal No.:	Cooler Temp. (°C): Obs'd: _____	Corr'd: _____	Therm ID No.: _____
Relinquished by: <u>DUKE PONTIN</u>	Company: _____	Date/Time: <u>6-1-18 AM</u>	Received by: <u>Eric Yuto</u>	Company: <u>TA-HON</u>
Relinquished by: _____	Company: _____	Date/Time: _____	Received by: _____	Company: _____
Relinquished by: _____	Company: _____	Date/Time: _____	Received in Laboratory by: _____	Company: _____