CAPCO ANALYTICAL SERVICES

1536 Eastman Avenue
Ventura, CA 93003
(805) 644-1095 Fax 644-9947

CHAIN OF CUSTODY RECORD

REPORT

Fax _____

Company _____

Address _____

_____

Phone _____ Contact _____

BILL TO: **P.O.#**

Company _____

Address _____

_____

Phone _____ Contact _____

PROJ. NO	PROJECT NAME

SAMPLERS: (Signature)

CONTAINER TYPES
A = AMBER B = BRASS G = GLASS
P = PLASTIC V = VOA VIAL O = OTHER

SAMPLE NO.	DATE SAMPLED	TIME SAMPLED	COMP	GRAB	SAMPLE DESCRIPTION	MATRIX				CONTAINER		ANALYSIS								REMARKS
						WATER	SOIL	SLUDGE	OTHER	#	TYPE									

CHECK ONE BOX:

DISPOSE SAMPLES ☐

RETURN SAMPLES ☐

The undersigned hereby acknowledges having received a copy of the Fee Schedule/General Information and Conditions, the provisions of which are a part of this agreement.

Relinquished by: (Signature)	Date/Time	Received by: (Signature)	Relinquished by: (Signature)	Date/Time	Received by: (Signature)
Relinquished by: (Signature)	Date/Time	Received by: (Signature)	Date/Time		

TURN AROUND TIME

24 Hr.	☐	5 Day	☐	☐
48 Hr.	☐	Standard	☐	☐
72 Hr.	☐	Other	☐	☐

WHITE COPY _____ CANARY COPY _____ PINK COPY _____