

T.E. LABORATORIES LTD  
 Trading As



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### CHAIN OF CUSTODY

Company Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

Company Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Company Address: \_\_\_\_\_ Customer

\_\_\_\_\_ Order number: \_\_\_\_\_

Please tick the box if effluent sample is submitted

Sample Identification	Time & Date of Sample Taken	Sample Taken By	Analysis Required	Turnaround Time Working Days

Signed (Customer): ..... Date: .....

FOR LABORATORY USE ONLY:

Time/Date samples Received	Received By	Sample condition	Lab Number	Due By Date