



Mystic Air Quality Consultants, Inc.

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CHAIN OF CUSTODY RECORD FOR LABORATORY ANALYSIS

Client Name		Client Address:		Sample Date:	
Phone #: _____ email _____		Contact: _____		Project #:	
Project Location & Information:					
				Analysis Requested	
Sample #	Sample Description & Location	<i>asbestos samples</i>			
		PLM	TEM	PCM	LEAD
Special Handling Instructions/Remarks:					
Sampled by: _____		Date: _____			
Signature: _____		Time: _____			
Released by: _____		Date: _____			
Signature: _____		Time: _____			
Received by: _____		Date: _____			
Signature: _____		Time: _____			
Released to Lab by: _____		Date: _____			
Signature: _____		Time: _____			
Received in Lab by: _____		Date: _____			
Signature: _____		Time: _____			
LAB DATA - Book #: _____ Page 4: _____ Log #: _____					

Turn around time rush one day 2 day 3 day

GIVE TO: _____