

# Analytical Consulting Technology, Inc.

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## SAMPLE CONTAINER REQUEST

Client: \_\_\_\_\_ Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Town: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Directions: \_\_\_\_\_

<b>Matrix &amp; Quantity</b>	
Client to Pick Up <input type="checkbox"/>	Sample Quantity <input type="checkbox"/>
Delever to Client Location <input type="checkbox"/>	Sample Quantity <input type="checkbox"/>
Send UPS/FedEx <input type="checkbox"/>	Matrix _____
<b>Add the following QA/QC containers</b>	
Include sufficient amount of DI water for client. <input type="checkbox"/>	Matrix _____
	Trip Blank <input type="checkbox"/> Field Blank <input type="checkbox"/>
	Matrix Spike <input type="checkbox"/> MS Duplicate <input type="checkbox"/>

### Sample containers

1000 ml Non-preserved plastic <input type="checkbox"/>	500ml Nitric/plastic <input type="checkbox"/>	40ml vials/HCL <input type="checkbox"/>	Zip Lock Bags <input type="checkbox"/>
500 ml Non-preserved plastic <input type="checkbox"/>	250ml Nitric/plastic <input type="checkbox"/>	40ml vials <input type="checkbox"/>	Sludge Jar <input type="checkbox"/>
120 ml Non-preserved plastic <input type="checkbox"/>	500ml Nitric/glass <input type="checkbox"/>	EPA vials with <input type="checkbox"/>	Wipes <input type="checkbox"/>
10 L plastic "Cubetainer" <input type="checkbox"/>	250ml NaOH/plastic <input type="checkbox"/>	10ml methanol <input type="checkbox"/>	Specify wipe analyte <input type="checkbox"/>
120 ml Sterile container <input type="checkbox"/>	1000 ml H2SO4 /plastic <input type="checkbox"/>	1000ml glass <input type="checkbox"/>	PCBs <input type="checkbox"/>
	500 ml H2SO4 / plastic <input type="checkbox"/>	1000ml glass w/HCL <input type="checkbox"/>	Lead <input type="checkbox"/>

### Requested Analysis

Inorganic	Organic	Metals Analysis	TCLP/SPLP
Alkalinity <input type="checkbox"/>	Sulfite <input type="checkbox"/>	Aluminum <input type="checkbox"/>	8 RCRA Metals <input type="checkbox"/>
Acidity <input type="checkbox"/>	Sulfide <input type="checkbox"/>	Antimony <input type="checkbox"/>	Volatile Compounds <input type="checkbox"/>
Bromide <input type="checkbox"/>	Oil & Grease <input type="checkbox"/>	Arsenic <input type="checkbox"/>	Pest./Herbicides <input type="checkbox"/>
Chloride <input type="checkbox"/>	EPA# 1664 <input type="checkbox"/>	Barium <input type="checkbox"/>	Semi-Volatiles <input type="checkbox"/>
Chlorine, Total <input type="checkbox"/>	ETPH <input type="checkbox"/>	Beryllium <input type="checkbox"/>	<b>Aquatic Tox</b>
Chlorine, Free <input type="checkbox"/>	TPH #418.1 <input type="checkbox"/>	Boron <input type="checkbox"/>	Screening <input type="checkbox"/>
Cyanide, Total <input type="checkbox"/>	TOC <input type="checkbox"/>	Cadmium <input type="checkbox"/>	Definitive <input type="checkbox"/>
Cyanide, Amenable <input type="checkbox"/>	TOX <input type="checkbox"/>	Calcium <input type="checkbox"/>	Chronic <input type="checkbox"/>
Fluoride <input type="checkbox"/>	Phenols <input type="checkbox"/>	Chromium -Triv. <input type="checkbox"/>	<b>Biological</b>
Iodide <input type="checkbox"/>	Surfactants <input type="checkbox"/>	Chromium -Hexv. <input type="checkbox"/>	Coliform-Total <input type="checkbox"/>
Ammonia-N <input type="checkbox"/>	Conductivity <input type="checkbox"/>	Cobalt <input type="checkbox"/>	Coliform-Fecal <input type="checkbox"/>
Kjeldahal-Nitrogen <input type="checkbox"/>	pH <input type="checkbox"/>	Copper <input type="checkbox"/>	Plate Count <input type="checkbox"/>
Nitrate <input type="checkbox"/>	Temperature <input type="checkbox"/>	Gold <input type="checkbox"/>	Salmonella <input type="checkbox"/>
Nitrite <input type="checkbox"/>	Color <input type="checkbox"/>	Iron <input type="checkbox"/>	BOD-5 <input type="checkbox"/>
Nitrogen, Total Organic <input type="checkbox"/>	Reactivity <input type="checkbox"/>	Lead <input type="checkbox"/>	COD <input type="checkbox"/>
Phosphorus, Total <input type="checkbox"/>	Ignitability <input type="checkbox"/>	<input type="checkbox"/> Residential Drinking Water	
Phosphorus, Ortho <input type="checkbox"/>	Flashpoint <input type="checkbox"/>	Nitrate, Nitrite, Odor, Color, Turbidity	
Sulfate <input type="checkbox"/>	Turbidity <input type="checkbox"/>	Chloride, pH, Manganese, Iron, Total Coliforms	
Radon Air/Water <input type="checkbox"/>	Hardness <input type="checkbox"/>	Sodium, Sulfate + Hardness	
	Solids- suspended <input type="checkbox"/>	<input type="checkbox"/> Physicals & Bacteria - PWS	
	Solids- settleable <input type="checkbox"/>		
	Solids - dissolved <input type="checkbox"/>		

Scheduled Date \_\_\_\_\_ Field Staff \_\_\_\_\_ Office Personnel \_\_\_\_\_

Date Delivered \_\_\_\_\_

**Include a copy of this request with the sample containers.**