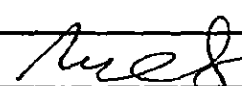


Client: ATI Test: M001 Air-O-Cell #Samples: 7
 Order: 291905209 Project: 19-664-PGCPs - Ardmore ES
 Disposition: Discard after 7/14/2019

TICAL, INC.
 30 NORTH
 NJ 08077
 220-3675

EMSL ANALYTICAL, INC.
 LABORATORY PRODUCTS TRAINING

FAX: (800) 786-0262

Company Name: ATI, Inc		EMSL-Bill to: <input type="checkbox"/> Same <input type="checkbox"/> Different If Bill to is Different note instructions in Comments					
Street: 4221 Rumsey Road, Suite 250		Third Party Billing requires written authorization from third party.					
City: Lanham	State/Province: MD	Zip/Postal Code: 20706	Country:				
Report To (Name): Brian Chapman / Mikal Frater		Telephone #: 202-558-7489					
Email Address: Brian@atiin.com & Mikal@atinc.com		Fax #:	Purchase Order:				
Project Name/Number: 19-664- PGCPs - Ardmore ES		Please Provide Results: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email					
U.S. State Samples Taken:		Project Zip Code:					
Sterile, Sodium Thiosulfate Preserved Bottle Used: <input type="checkbox"/> Biocide Used in Source (specify): <input type="checkbox"/>		Connecticut Samples: <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential					
Public Water Supply Samples: <input type="checkbox"/> Note: All results may automatically be reported to DOH if required by state.							
Turnaround Time (TAT) Options - Please Check							
<input type="checkbox"/> 3 Hour	<input type="checkbox"/> 6 Hour	<input type="checkbox"/> 24 Hour	<input type="checkbox"/> 48 Hour				
<input type="checkbox"/> 72 Hour	<input type="checkbox"/> 96 Hour	<input checked="" type="checkbox"/> 1 Week	<input type="checkbox"/> 2 Week				
Microbiology Test Codes							
M001 Air-O-Cell	M174 MoldSnap	M012 Pseudomonas aeruginosa (PIA**)	M115 Sewage Screen - Water (PIA**)				
M030 Micro 5	M032 Allergenco-D	M024 Pseudomonas aeruginosa (MFT*)	M116 Sewage Screen - Water (MPN**)				
M041 Fungal Direct Examination		M015 Heterotrophic Plate Count	M117 Sewage Screen - Swab (PIA**)				
M169 Pollen ID & Enumeration		M017 Total Coliform & E. coli (Colilert PIA**)	M013 Sewage Screen - Swab (MFT*)				
M280 Dust Characterization Level-1		M018 Total Coliform & E. coli (MFT*)	M133 Methicillin-resistant Staph. aureus (MRSA)				
M281 Dust Characterization Level-2		M114 Total Coliform & E. coli Enumeration (Colilert MPN**)	M031 Rapid-growing non-TB Mycobacteria Detection & Enumeration				
M005 Viable Fungi- Air Samples (Genus ID & Count)		M019 Fecal Coliform (MFT*)	M014 Endotoxin Analysis				
M006 Viable Fungi- Air Samples (Includes Penicillium, Aspergillus, Cladosporium, Stachybotrys Species ID & Count)		M020 Fecal Streptococcus (MFT*)	M044 Group Allergen (Cat, Dog, Cockroach, Dust Mite)				
M007 Culturable fungi - Surface Samples (Genus ID & Count)		M029 Enterococci (MFT*)	Other See Analytical Price Guide				
M008 Culturable fungi - Surface Samples (Includes Penicillium, Aspergillus, Cladosporium, Stachybotrys Species ID & Count)		M129 Enterococci (Enterolert PIA**)	Legionella Analysis Please use EMSL Legionella COC				
M009 Bacteria Culture Gram Stain & Count		M180 Real Time qPCR-ERMI 36 Panel					
M010 Bacteria Count & ID - 3 Most Prominent		M025 Sewage Screen -Water (MFT*)					
M011 Bacteria Count & ID - 5 Most Prominent							
		*MFT= Membrane Filtration Technique **MPN= Most Probable Number ***PIA= Presence/Absence					
Name of Sampler: Brian Chapman & Mikal Frater		Signature of Sampler: 					
Sample #	Sample Location/Description	Sample Type	Potable/ NonPotable (Only for Waters)	Test Code	Volume/ Area	Date/Time Collected	Temperature (°C) (Lab Use Only)
Example A1	Kitchen Sink/Tap	Water	<input checked="" type="checkbox"/> P <input type="checkbox"/> NP	M017	100 mL	9/1/13 4:00 PM	
19-664-01	Outside Parking Lot	Air	<input type="checkbox"/> P <input type="checkbox"/> NP	M001	75L	05-15-19 - 10:35	
19-664-02	Field Blank	Air	<input type="checkbox"/> P <input type="checkbox"/> NP	M001	75L	05-15-19 -	
19-664-03	Main Office	Air	<input type="checkbox"/> P <input type="checkbox"/> NP	M001	75L	05-15-19 - 10:49	
19-664-04	Computer Lab Room 20	Air	<input type="checkbox"/> P <input type="checkbox"/> NP	M001	75L	05-15-19 - 10:56	
19-664-05	Room 25	Air	<input type="checkbox"/> P <input type="checkbox"/> NP	M001	75L	05-15-19 - 11:07	
Client Sample # (s): - 7		Total # of Samples: 7		Samples Received Chilled? Yes / No (Lab Use Only)			
Relinquished (Client): MIKAL FRATER		Date: 5-15-19		Time: 3:55			
Received (Lab): <i>L. Bonworth Walk In</i>		Date: 5/15/19		Time: 3:55 pm			
Comments/Special Instructions:							

EMSL Analytical, Inc.'s Laboratory Terms and Conditions are incorporated into this chain of custody by reference in their entirety. Submission of samples to EMSL Analytical, Inc. constitutes acceptance and acknowledgment of all terms and conditions by Customer.

