



ANATEK LABS, INC - Multi-state Certified, NELAC Accredited

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Washington Chain of Custody - Drinking Water Analysis

WATER SYSTEM _____
 SEND REPORT TO _____
 ADDRESS _____
 CITY STATE ZIP _____

Water System # _____
 Phone Number _____
 E-Mail _____
 County _____

Sample Type	Sample Purpose
<input type="checkbox"/> Before (B)	<input type="checkbox"/> Compliance (C)
<input type="checkbox"/> After (A)	<input type="checkbox"/> Investigative (I)
<input type="checkbox"/> Unknown (U)	<input type="checkbox"/> Other Purpose (B)

Date & Time Collected _____
 Sampler Name: _____
 Sampler Signature: _____

Payment due with samples unless credit has been established

Sample Location (required) _____

DOH Source # (Check one and fill in where necessary)

Single Well Source Number: _____
 Flowing Distribution (92)
 Composite Sampling (95) List source #'s _____
 Blended Sample (96) List source #'s _____

Receiving Check List

Received Intact No Headspace
 Labels & Chains Agree Temp: _____
 Ice/Ice-Packs Present: _____
 Custody Seals Present: _____
 Preservatives: _____

Check Desired Analyses

IOCs	VOCs & DBPs	SOCs	PFC/PFAS	Other (specify):
<input type="checkbox"/> Lead <input type="checkbox"/> Copper <input type="checkbox"/> Arsenic <input type="checkbox"/> Nitrate <input type="checkbox"/> Nitrite <input type="checkbox"/> WA Complete IOC <input type="checkbox"/> Asbestos	<input type="checkbox"/> VOC (VOC1) <input type="checkbox"/> TTHM <input type="checkbox"/> HAA5 <input type="checkbox"/> TOC <input type="checkbox"/> Alkalinity RADs <input type="checkbox"/> Gross Alpha <input type="checkbox"/> Gross Beta <input type="checkbox"/> RAD 226 <input type="checkbox"/> RAD 228 <input type="checkbox"/> Uranium	<input type="checkbox"/> Phase II SOC <input type="checkbox"/> Semivolatiles (PEST1) <input type="checkbox"/> Herbicides (HERB1) <input type="checkbox"/> Carbamates (INSECT1) <input type="checkbox"/> Pesticides (PEST1) <input type="checkbox"/> EDB <input type="checkbox"/> Phase V SOC <input type="checkbox"/> Diquat <input type="checkbox"/> Endothall <input type="checkbox"/> Glyphosate <input type="checkbox"/> Dioxin	<input type="checkbox"/> PFAS by EPA 533	

Customer Signature _____
 Shipping/Delivery Date _____

Received By _____
 Date/Time Rec'd _____

Samples submitted to Anatek Labs may be subcontracted to other accredited labs if necessary. This message serves as notice of this possibility.
 Subcontracted analyses will be clearly noted on the analytical report.