

**CHAIN OF CUSTODY - TOXICOLOGY**

Form: C-0002

Approval: *A.F./SW*

Issue: January 9, 2018 Rev. 7

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Ship to: 85C Bremigens Blvd.  
Paradise, NL  
A1L 4A2

Tel: (709) 726-9345

**CUSTOMER INFORMATION**

Page \_\_\_\_\_ of \_\_\_\_\_

Customer Name: \_\_\_\_\_ Submitted By: \_\_\_\_\_  
 Address: \_\_\_\_\_ Project No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ P.O. No.: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Invoice To: \_\_\_\_\_  
 Report To: \_\_\_\_\_

Sample ID, Serial # and Location	Date/Time collected (Mandatory)	No. of Containers
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Analysis Required	
<input type="checkbox"/>	LT <sub>50</sub> - Daphnia
<input type="checkbox"/>	LT <sub>50</sub> - Rainbow Trout
<input type="checkbox"/>	LT <sub>50</sub> Rainbow Trout (pH Stabilization)
<input type="checkbox"/>	LT <sub>50</sub> - Threespine Stickleback
<input type="checkbox"/>	LC <sub>50</sub> - Daphnia
<input type="checkbox"/>	LC <sub>50</sub> - Rainbow Trout
<input type="checkbox"/>	LC <sub>50</sub> Rainbow Trout (pH Stabilization)
<input type="checkbox"/>	LC <sub>50</sub> - Threespine Stickleback
<input type="checkbox"/>	Microtox - Sediment
<input type="checkbox"/>	Microtox - Liquid
<input type="checkbox"/>	Amphipod
<input type="checkbox"/>	Polychaete
<input type="checkbox"/>	pH
<input type="checkbox"/>	Ammonia
<input type="checkbox"/>	Metals
<input type="checkbox"/>	Other

For Internal use only:

Received by: _____	Date / Time: _____	Arrival Temperature: _____	Condition: _____	Project No.: _____
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