

A & L CANADA LABORATORIES INC.

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PESTICIDE CHAIN OF CUSTODY



CLIENT NAME:	
Address:	
City:	
Province:	Postal code:
Phone:	Fax:
E-mail:	
Attention:	
P.O. #:	Project #:
Account #	Quote #:

ANALYSIS REQUESTED									

SAMPLING DATE:

W.O.#:

ENTER TEST REQUIRED IN ROWS ABOVE

ITEM #	SAMPLE TYPE	SAMPLE IDENTIFICATION	PLACE AN X IN THE APPROPRIATE BOX BELOW TO INDICATE TEST										LABORATORY USE ONLY	

LAB RESULTS TO BE RETURNED BY: Phone Fax Courier (client cost) E-mail Mail

Analysis Authorized By:

Custody Relinquished By:

Date:

Received by A&L

Date:

Samples will be disposed of after 60 days

A&L-F-001 revised June 2014

NO ANALYTICAL WORK WILL BEGIN WITHOUT SIGNED AUTHORIZATION

Page 1 of 1