



# Asbestos Bulk Sample Chain of Custody

<b>IEHS Job #</b>	
<b>IEHS Invoice #</b>	

**BILLING INFORMATION**

<b>Name:</b>	Contact:
Address:	<b>Email:</b>
Telephone:	Client PO #:
	Client Job #:

**Sampling Address:** *(required)* \_\_\_\_\_

Sample #	Room	Material
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

At Island EHS, we strive to analyze bulk samples within 48 hours,  
with the exception of any unforeseen circumstances  
\*\*If you need your sample tested for lead, please fill out a lead chain of custody.\*\*

**Released by:** \_\_\_\_\_  
*(^who dropped off sample^)* *(Please print clearly)*

Date/Time: \_\_\_\_\_ / \_\_\_\_\_

Accepted by: \_\_\_\_\_

Date/Time: \_\_\_\_\_ / \_\_\_\_\_

Reported By: \_\_\_\_\_

Date/Time: \_\_\_\_\_ / \_\_\_\_\_