



# Upper Guadalupe River Authority Chain of Custody



UGRA Customer Information (please fill out completely) Reports will be emailed unless otherwise specified.

<b>Company Name</b>			<b>Email Address 1</b>		
<b>Primary Contact</b>			<b>Email Address 2</b>		
<b>Alternate Contact</b>			<b>Phone Number</b>		
<b>Mailing Address</b>			<b>Do you need a RUSH (doubles price)?</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes		

<b>Laboratory Use Only</b>	
*Subcontracted To:	Sample Intact? Y N Ice Present? Y N
Temperature:	°C
Container	Preservative: ST = Na2S2O3, S=H2SO4, N=HNO3, H=HCl, O=other
Preservation: <input checked="" type="checkbox"/> = acceptable	Preservative Added: type
Preservative Added: date/time	Fraction

<b>Project/System Name</b>	pH and Dissolved Oxygen measurements should be taken in the field. Measurements taken in a laboratory should be taken within 15 minutes of collection. Since this holding time is nearly impossible to adhere to, please be aware that all pH and DO measurements taken after 15 minutes from collection will be qualified in the reports. Qualified results may not be acceptable for regulatory compliance purposes.
<b>Permit/System Number</b>	
<b>Samples Collected By:</b>	<b>Sampler Phone #:</b>
<b>Sample Source</b>	
<b>Sample Type</b>	

U1	U2	U2	U2	U4
ST	NA	NA	NA	ST
	NA	NA	NA	
NA	NA	NA	NA	NA

**Comments:**

Reporting to a third party? circle one: HGCD TCEQ Lender Other \_\_\_\_\_

Sample Location	Date	Time	Res. Cl2	Sample Source		Sample Type		Total Coliform/E. Coli P/A	Standard	BOD or CBOD (circle one)	TSS	Total Coliform/E. Coli Counts	Please mark tests to be run with an X				UGRA Work Order Number
				Drinking Water	Waste Water	Surface Water	Other						Grab	Composite start date/time	other		
		AM	Free	Raw	Raw												
		PM	Total	Treated	Effluent												
		AM	Free	Raw	Raw												
		PM	Total	Treated	Effluent												
		AM	Free	Raw	Raw												
		PM	Total	Treated	Effluent												
		AM	Free	Raw	Raw												
		PM	Total	Treated	Effluent												

Relinquished By	Date	Time	Received By	Date	Time
Relinquished By	Date	Time	Received By	Date	Time

UGRA may subcontract testing to other labs. Subcontracted work will be identified in the report. \$ \_\_\_\_\_  Paid

UGRA supplied containers: U1 = 120ml Sterile U2 = 2L HPDE no preservative U3 = 250ml HPDE preservative as noted U4 = 250ml Sterile S = bottle from subcontract lab Cash CC Check Ref \_\_\_\_\_