

# NJAL Laboratory Bottle Request/ Delivery Coordination Form

**Client:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Project:** \_\_\_\_\_ **Contact Phone Number:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_ **Contact Email:** \_\_\_\_\_

**1 Scope of Work Description:** \_\_\_\_\_

**Analytical Methods Requested:** \_\_\_\_\_

Quantity (number)	Matrix (Soil, Water, Effluent)	Analysis	Sample Turn Around Time
<b>Field Sampling QC Requests</b>			
<b>Trip Blank</b>	Y/N	<b>No. Sets Needed</b>	
<b>Field Blank</b>	Y/N	<b>No. Sets Needed</b>	
<b>Lab Reagent Water (amount)</b>	Y/N		

**2 Bottle Delivery Information**

**Site Location:** \_\_\_\_\_  
**Date and Time of Bottle Delivery:** \_\_\_\_\_  
**On Site Contact/Phone Number:** \_\_\_\_\_  
**Special Instructions:** \_\_\_\_\_

**3 Sample Pick Up Information**

**Site Location:** \_\_\_\_\_  
**Date and Time of sample pick up:** \_\_\_\_\_  
**On Site Contact/Phone Number:** \_\_\_\_\_  
**Special Instructions:** \_\_\_\_\_

**4 Reporting Information**

**Reporting format:** \_\_\_\_\_ **NJDEP Reduced/Data Summaries/Full/Other**  
**Pricing/ Quote Reference:** \_\_\_\_\_ **Specify Price Schedule or Quote Number**  
**Client Name/Office Title** \_\_\_\_\_ **Reporting Client Business**  
**Project Manager** \_\_\_\_\_ **Name/Title/Email Address**  
**Report Address 1** \_\_\_\_\_ **Street/Building/Floor/Suite**  
**Report Address 2** \_\_\_\_\_ **City/State/ Zip Code**  
**Special Instructions:** \_\_\_\_\_

**5 NJAL Confirmation**

**Date Confirmed** \_\_\_\_\_  
**Date Scheduled** \_\_\_\_\_  
**NJAL Project Manager** \_\_\_\_\_  
**NJAL Field services Contact** \_\_\_\_\_