

| NRDA Chain of Custody Form                                      |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|-----------------------------------------------------------------|------|-------------|---------------|--------------------|--------------------------------------------------------------------------------------------|------|----------------------------------|-----------|--|-------------------|-----------------|---------------|--|--|
| Sampler Information                                             |      |             |               |                    |                                                                                            |      | NOAA Contact Information         |           |  |                   |                 |               |  |  |
| Contact/Phone:                                                  |      |             |               |                    |                                                                                            |      | Contact/Phone:                   |           |  |                   |                 |               |  |  |
| Affiliation:                                                    |      |             |               |                    |                                                                                            |      | Mailing Address:                 |           |  |                   |                 |               |  |  |
| Incident Name:                                                  |      |             |               |                    |                                                                                            |      | Email Address (send results to): |           |  |                   |                 |               |  |  |
| Special Instructions: Call NOAA contact upon receipt of samples |      |             |               | Analyses requested |                                                                                            |      |                                  |           |  |                   | Lab Name:       |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  | # of containers   | Waybill Number: |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   | Lab Use Only    | Lab Report #: |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 | # of Coolers: |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 | Cooler Temp:  |  |  |
| Turn Around Time:                                               |      |             |               |                    |                                                                                            |      |                                  |           |  |                   | Comments        |               |  |  |
| Sample ID                                                       |      | Sample Date | Sample Time   | Matrix             |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      | mm/dd/yyyy  | (24-hr local) |                    | Enter Analyses above, with preservative specified, if needed.<br>Enter x's in boxes below. |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
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|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
| Relinquished by                                                 |      |             |               |                    | Received by                                                                                |      |                                  |           |  |                   |                 |               |  |  |
| Date                                                            | Time | Signature   |               | Printed Name/Org.  |                                                                                            | Date | Time                             | Signature |  | Printed Name/Org. |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |
|                                                                 |      |             |               |                    |                                                                                            |      |                                  |           |  |                   |                 |               |  |  |

### Organics Analyses

Aliphatics  
Alkalated PAH Homologues  
Chlorinated Herbicides (8151)  
Dioxins and Furans (8290)  
OC Pesticides (8081)  
OP Pesticides (8141)  
PAH (8270)  
PCB Aroclors (8082)  
PCB Congeners (680)  
Phenols (8041)  
PIANO (Volatile Paraffins, IsoParaffins, Aromatics, Naphthenes, & Olefins)  
Semivolatile Organics (8270)  
Steranes/Triterpanes  
Volatile Organics (8260)  
[any other analyses or method as needed]

### Petroleum Hydrocarbons

BTEX  
Extractable Petroleum Hydrocarbons (EPH)  
Petroleum Hydrocarbons (8015)  
TPH Oil & Grease (418.1)  
TPH-Diesel  
TPH-Gas  
NWTPH-Dx (NW method)  
NWTPH-Gx (NW method)  
[any other analyses or method as needed]

### Inorganic Analyses

Ammonia  
Grain Size  
Total Dissolved Solids  
Total Kjeldahl Nitrogen (TKN)  
Total Organic Carbon (TOC)  
Total Solids  
Total Suspended Solids  
[any other analyses or method as needed]

### Metals Analyses

CLP Metals  
Low Level Arsenic  
Low Level Mercury (1631)  
Mercury (7470/7471)  
MTCA Metals (As, Cd, Cr, Pb, Hg)  
PP Metals (Ag, As, Be, Cd, Cr, Cu, Hg, Ni, Pb, Sb, Se, Tl, Zn)  
RCRA Metals (As, Ba, Cd, Cr, Pb, Se, Ag, Hg)  
TCLP Metals  
[any individual metal or list of metals as needed]

### Bio Analyses

Amphipod survival test  
Bivalve bioaccumulation test (chronic)  
Gonad Condition Index  
Infaunal Analysis  
Larval Bivalve development test  
Larval Echinoderm development test  
Length Frequency  
Mysid survival test  
[any other test as needed]