FILLING OUT YOUR ASBESTOS COC – HOMEOWNER GUIDE

Compani Primary E-Mail: Sampled	Contact		Dro	Asbestos Chain of Custody ping: 600 South Wagner Rd. Ann Arbor MI 48103 pbox: 674 South Wagner Rd. Ann Arbor MI 48103 877-220-3528 Linfo@nellabs.com Project Name: Project Location: Project ID: Poo. Number:					Page 1 of For Lab Use Only Lab. No. Accept Reject Reporting Method (Check One Box) Email: Other:					
Dampica	Relinquished By	Via				Received By			Date and Time					
*S	PLM - Standard Methods WORKER OF THE STANDARD MISSES ALCTO THE STANDA	g Fu Sc F	PLM Check for pos Check for conditi	Options litive stop onal 400 poin		PLM Ve	Other Analyses ermiculite - EPA 600 IOSH 7400 Specify Below	/R-04/004	Turnaround Time R-04/004 ASAP (2 hour) Rush 24-Hour					
	00 Point Count		Range for point counting						3-Day 5-Day					
					Samples									
No.	Sample ID (Must Match Sample Labeling)		Descri	ption		Location			e/Area (icable)	Mat'i Type	Mat'l Cond.	Friable		
1 2 3 4 5 6 7 8 9														
COC V 724	Damage Catego Friability: F=Friable NF=N		maged DG=Dam				al Damage PSD=Pote lation SM=Surfacing N							

Legally, this document constitutes a contract, so it does need to be filled out properly. If there are mandatory fields missing, we will need to get a written request to amend via e-mail. The minimally mandatory items appear **bolded** below.

Contact Information – The contact information for the company or private party submitting the sample. We minimally just need **enough information to identify you and send the report/invoice**, all fields do not need to be filled. Please make sure we have your e-mail address to send the report/invoice to legibly written.

Project Information – Any identifying information you want in the report header; name, address, description, etc. All fields do not need to be filled. Optional.

Reporting Method—Please indicate whether you would like the report by e-mail or other method (fax, mail, etc.). You can also use this field for your e-mail address if easier. If nothing is indicated, we will default to e-mail. Optional.

Relinquished by/Via/Date and Time – Fill out in order to ensure unbroken chain of custody. Optional.

Test and TAT – This is where you request your asbestos testing and additional parameters.

Column 1 – "PLM Standard Methods" The standard bulk asbestos testing is "Standard" PLM with CVE. **Mandatory**.

Column 2 – "PLM Options" Homeowners will generally not need to worry about this. Optional.

Column 3 – "Other Analysis" Homeowners will generally not need to worry about this. Optional.

Column 4 – "Turnaround Time" We offer non-account holders Rush (half day) and 3-Day turnaround options. All pricing includes up to five samples; anything beyond that incurs an additional charge. **Mandatory.**

Samples – A table of all included samples.

Column 1 – "Sample ID" Each individual sample must have a "Sample ID" entry that exactly matches the sample bag label. Generally you will just want to number them 1, 2, 3, etc. or A, B, C etc., but any labeling is fine as long as it matches the sample bag labels exactly and uniquely. **Mandatory.**

Columns 2 and 3 – "Description" and "Location" These columns allow you to record the material type and sampling location so that you can easily identify individual materials on the report. Optional.

Other columns – Homeowners will not need to worry about these.

In summary, the minimum information required is:

- Enough "Contact Information" to identify and contact you as necessary
- Testing selected in "PLM Standard Methods"
- "Turnaround Time" selected
- A "Sample ID" for each sample that uniquely matches a single sample bag label.

That's it! If you have further questions, feel free to send us an e-mail at Info@PELLabs.com

CORRECTLY FILLED OUT COC:

						Asbestos Chain of Custody pping: 600 South Wagner Rd. Ann Arbor MI 48103 ppbox: 674 South Wagner Rd. Ann Arbor MI 48103 877-220-3528 Linfo@pellabs.com				Page 1 of For Lab Use Only Lab. No. Accept Reject						
Contact Information						Project Information					Reporting Method					
	any:				Project Name: Remodeling Bathroom					(Check One Box)						
rimary Contact: Tabitha Homeowner						Project Location: 1234 Main St.					Email: √					
E-Mail: TabbyHomey@gmail.com						Project ID:					Other:					
amp	ed By:	Time:	Sample	ed:	P.O. Nu	mber:										
	Delineviahad Bu	· ·	/: <u>-</u>	Date and	T:			Descined Bu	_		Dete	and T				
Relinquished By Tabitha Homeowner			Via Date and Drop Box 1/2/25 12						_	Date and Time						
	Tabitila Homeowner	DIO	DOX	1/2/20 12	-piii											
						Test and TAT										
PLM - Standard Methods				PLM	PLM Options			Other Analyses			Turnaround Time					
Methods below compliant with EPA 600/R-93/116 and 40 CFR 763 App. E to			Check for positive stop				PLM Vermiculite - EPA 600/R-04/004			ASAP (2 hour)						
X "Standard" PLM with CVE			Check for conditional 400 point count				PCM NIOSH 7400			X Rush						
400 Point Count C				Check for conditional 1000 point count			Other: Specify Below			24-Hour						
1000 Point Count					Range for point counting					3-Day						
											5-Day	C.				
						Samples										
Sample ID					Samples				Volume	e/Area	Mat'l	Mat'l				
No.	(Must Match Sample Labeling)		Descri		iption		Location		(as appl			Cond.	Friable			
1	#1			Floor Tile a			Bathroom Floor				.,,,,,					
2	#2	Shower C			Caulking		Show									
3	#3	Sink Ca					Sink and Backsplash					П				
4																
5																
6																
7																
8																
9																
10																
11																
								=Potential Damage PSD=Potentia								