



# Chain of Custody Form

|                      |  |
|----------------------|--|
| Date: _____          | CompanyPay: <input type="checkbox"/>       |
| EBI Ref#: _____      | CustomerPay: <input type="checkbox"/>      |
| CompanyRef: _____    | Pre-Remediation: <input type="checkbox"/>  |
| CompanyID#: _____    | Progress: <input type="checkbox"/>         |
| CustomerP.O.#: _____ | Post-Remediation: <input type="checkbox"/> |

Company/ClientName: \_\_\_\_\_  
 ContactPerson: \_\_\_\_\_  
 Company/ClientAddress: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Sampled by: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Project/CustomerName: \_\_\_\_\_  
 Site Address (If same as Client Address enter same): \_\_\_\_\_

| Sample No. | Date | Analysis Type | Sample Type | Lab No. | Sample Location | Turn Around<br>7, 3, or 1 day |
|------------|------|---------------|-------------|---------|-----------------|-------------------------------|
| #1         |      |               |             |         |                 |                               |
| #2         |      |               |             |         |                 |                               |
| #3         |      |               |             |         |                 |                               |
| #4         |      |               |             |         |                 |                               |
| #5         |      |               |             |         |                 |                               |

|   |   |                                     |
|---|---|-------------------------------------|
| Sent by:<br>Date/Time:                  | Received by:  | Lab due date:                       |
| Tests number:                           |   |                                     |
| 1. ERMI<br>2. HERTSMI-2<br>3. Endotoxin | 4. Bacteria and mold NGS<br>5. Actino<br>6. Actino/Endotoxin/H2 | 7. Actino/Endotoxin/ERMI<br>8. Lyme |

Please Return This Form With Samples To  
 EnviroBiomics, Inc  
 11550 IH-10 W, Suite 105  
 San Antonio TX 78230

**Contact Details**  
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 Reviewed and Revised: 03/28/2018 Form LAB-3