

POLLEN

ENVIRONMENTAL, LLC

3039 Davis Road Fairbanks, AK 99709 | 907.479.8368 | www.pollenenv.com

CHAIN OF CUSTODY/WORKORDER FORM

COC #: DEC Chena River

CLIENT INFORMATION		Contact Person: Jeff Fisher		Requested Analysis										Page 1 of 1			
Name: Alaska DEC		WWTP APDES #: N/A PWS ID #: N/A Send Results to ADEC: <input type="checkbox"/> Yes <input type="checkbox"/> No Purchase Order/Charge Code:		Preservative Added										Requested TAT:			
Billing Address: 610 University Ave														<input type="checkbox"/> Normal Turnaround <input type="checkbox"/> RUSH by: _____ DATE: _____			
City, State, Zip: Fairbanks, Ak 99709																	
Phone: (907) 451-2347																	
Fax:																	
Email: jeff.fisher@alaska.gov				Number of Containers	E. Coli SM9223B-QT	Fecal Coliform SM9222D											
Project Name: Chena River Monitoring																	
Sampled By: Jeff Fisher																	
Sample Identification	Sample Date	Sample Time	Matrix				Lab ID#	Sub Lab ID#									Sample Comments
Chena River Site 1	5/14/25	9:50 AM	W				PEF105178		2	X	X						
Chena River Site 2	5/14/25	10:20 AM	W				PEF105179		2	X	X						
Chena River Site 2 Duplicate	5/14/25	10:20 AM	W				PEF105180		2	X	X						
Chena River Site 3	5/14/25	10:40 AM	W				PEF105181		2	X	X						
Special Instructions/QC Requirements & Comments:												Sample Temperatures Pollen Env Temperature on arrival: 0.7 °C Sub Lab Temperature on arrival: _____ °C					
Relinquished by: Jeff Fisher		Company: DEC		Date & Time: 5/14/25 @ 11:10 AM		Received by: [Signature]		Company: Pollen Env.		Date & Time: 5/14/25 @ 1110							
Relinquished by:		Company:		Date & Time:		Received by:		Company:		Date & Time:							
Relinquished by:		Company:		Date & Time:		Received by:		Company:		Date & Time:							

Accuracy, Precision, and Professional Service

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CERTIFICATE OF ANALYSIS

Alaska Department of Environmental Conservation

Attn: Jeff Fisher

610 University Avenue

Fairbanks, AK 99709

Phone: (907) 451-2347

E-mail: jeff.fisher@alaska.gov

Report Date: 5/16/2025

Receipt Date: 5/14/2025

Sample Date: 5/14/2025

Sample Time: 9:50 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**

Client Sample ID: **Chena River Site 1**

Pollen Env. Lab ID: **PEF105178**

COC #: **DEC Chena River**

Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

mg/L = milligrams per Liter

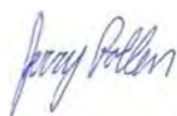
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/14/25 at 4:10 PM.

Comments: E. coli run started 5/14/2025 at 3:35 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	4.0	CFU/100mL	1.0	JKI	5/14/2025	
E. coli	SM9223B-QT	2.0	MPN/100mL	1.0	JKI	5/14/2025	



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Report Date: 5/16/2025

Receipt Date: 5/14/2025

Sample Date: 5/14/2025

Sample Time: 10:20 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**Client Sample ID: **Chena River Site 2**Pollen Env. Lab ID: **PEF105179**COC #: **DEC Chena River**Sample Matrix: **Water****Definitions:**

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

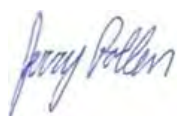
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/14/25 at 4:10 PM.**Comments:** E. coli run started 5/14/2025 at 3:35 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	6.0	CFU/100mL	1.0	JKI	5/14/2025	
E. coli	SM9223B-QT	7.5	MPN/100mL	1.0	JKI	5/14/2025	

**Jerry Pollen****Pollen Environmental, LLC**

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Report Date: 5/16/2025

Receipt Date: 5/14/2025

Sample Date: 5/14/2025

Sample Time: 10:20 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**Client Sample ID: **Chena River Site 2 Dup**Pollen Env. Lab ID: **PEF105180**COC #: **DEC Chena River**Sample Matrix: **Water****Definitions:**

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

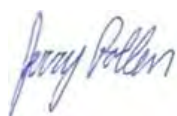
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/14/25 at 4:10 PM.**Comments:** E. coli run started 5/14/2025 at 3:35 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	4.0	CFU/100mL	1.0	JKI	5/14/2025	
E. coli	SM9223B-QT	6.3	MPN/100mL	1.0	JKI	5/14/2025	

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Report Date: 5/16/2025

Receipt Date: 5/14/2025

Sample Date: 5/14/2025

Sample Time: 10:40 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**Client Sample ID: **Chena River Site 3**Pollen Env. Lab ID: **PEF105181**COC #: **DEC Chena River**Sample Matrix: **Water****Definitions:**

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

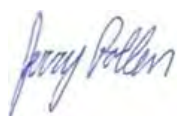
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/14/25 at 4:10 PM.**Comments:** E. coli run started 5/14/2025 at 3:35 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	6.0	CFU/100mL	1.0	JKI	5/14/2025	
E. coli	SM9223B-QT	6.3	MPN/100mL	1.0	JKI	5/14/2025	

**Jerry Pollen****Pollen Environmental, LLC**

SAMPLE RECEIPT CHECKLIST

Date & Time Received 5/14/25 @ 1110 Initials AMC

Laboratory Identification PEF105178-105181

N/A YES NO

- | | | | |
|-------------------------------------|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Custody Seals intact? (N/A if hand delivered) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Chain of Custody (COC) present and properly filled out? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Samples received in hold-time? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper container and preservatives used? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Bottles received intact and properly labeled? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Do sample labels match the COC? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Sufficient volume of sample for all analysis? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Temperature Blank received in cooler? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Did samples arrive in container with ice/ice packs? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If samples are above 6 Degrees Celsius, were samples taken within two hours of delivery to lab? If so, mark ITTC (Insufficient Time To Cool) on COC form. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are air bubbles larger than ¼" present in VOA vials? |

Notes: _____

*Temperature upon receipt at the laboratory 0.7 °C

- ☐ internal sample kit thermometer ☒ infra-red thermometer