

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				Perservative Added		Requested TAT:		
Billing Address: 610 University Ave		WWTP APDES #: N/A				<input type="checkbox"/> Normal Turnaround		
City, State, Zip: Fairbanks, Ak 99709		PWS ID #: N/A				<input type="checkbox"/> RUSH by:		
Phone: (907) 451-2347		Send Results to ADEC:				DATE: _____		
Fax:		<input type="checkbox"/> Yes <input type="checkbox"/> No						
Email: jeff.fisher@alaska.gov		Purchase Order/Charge Code:						
Project Name: Chena River Monitoring								
Sampled By: JF								
Sample Identification	Sample Date	Sample Time	Matrix	Lab ID#	Sub Lab ID#	Number of Containers		Sample Comments
Chena River Site 1	8/6/24	12:35pm	Water	PEF97627		2	X X	
Chena River Site 2	8/6/24	1:10 pm	Water	PEF97628		2	X X	
Chena River Site 2 (Duplicate)	8/6/24	1:10 pm	Water	PEF97629		2	X X	
Chena River Site 3	8/6/24	1:35pm	Water	PEF97630		2	X X	
Special Instructions/QC Requirements & Comments:						Sample Temperatures		
						Pollen Env Temperature on arrival: 5.8 °C		
						Sub Lab Temperature on arrival: _____ °C		
Relinquished by:	Company: DEC	Date & Time: 8/6/24 @ 2:05pm	Received by:	Company: Pollen Env.	Date & Time: 8/6/24 @ 14:05			
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: 8/8/2024

Receipt Date: 8/6/2024

Sample Date: 8/6/2024

Sample Time: 12:35 PM

Sampled By: JF

Project / Location: **Chena River Monitoring**

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

Pollen Env. Lab ID: **PEF97627**

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

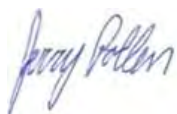
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 8/6/2024 at 3:00 PM.

Comments: E. coli run started 8/6/2024 at 2:20 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	48.0	CFU/100mL	1.0	JKI/JEP	8/6/2024	
E. coli	SM9223B-QT	104.6	MPN/100mL	1.0	JKI	8/6/2024	



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Report Date: 8/8/2024

Receipt Date: 8/6/2024

Sample Date: 8/6/2024

Sample Time: 1:10 PM

Sampled By: JF

Project / Location: **Chena River Monitoring**

Client Sample ID: **Chena River Site 2**

Pollen Env. Lab ID: **PEF97628**

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

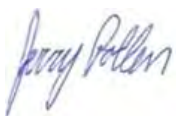
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 8/6/2024 at 3:00 PM.

Comments: E. coli run started 8/6/2024 at 2:20 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	43.0	CFU/100mL	1.0	JKI/JEP	8/6/2024	
E. coli	SM9223B-QT	51.2	MPN/100mL	1.0	JKI	8/6/2024	



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Receipt Date: 8/6/2024

Sample Date: 8/6/2024

Sample Time: 1:10 PM

Sampled By: JF

Project / Location: **Chena River Monitoring**
Client Sample ID: **Chena River Site 2 Duplicate**
Pollen Env. Lab ID: **PEF97629**
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

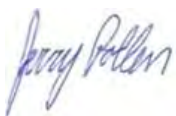
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 8/6/2024 at 3:00 PM.

Comments: E. coli run started 8/6/2024 at 2:20 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	41.0	CFU/100mL	1.0	JKI/JEP	8/6/2024	
E. coli	SM9223B-QT	77.6	MPN/100mL	1.0	JKI	8/6/2024	



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Report Date: 8/8/2024

Receipt Date: 8/6/2024

Sample Date: 8/6/2024

Sample Time: 1:35 PM

Sampled By: JF

Project / Location: **Chena River Monitoring**

Client Sample ID: **Chena River Site 3**

Pollen Env. Lab ID: **PEF97630**

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

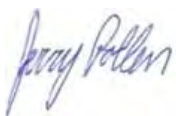
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 8/6/2024 at 3:00 PM.

Comments: E. coli run started 8/6/2024 at 2:20 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	48.0	CFU/100mL	1.0	JKI/JEP	8/6/2024	
E. coli	SM9223B-QT	62.0	MPN/100mL	1.0	JKI	8/6/2024	



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SAMPLE RECEIPT CHECKLIST

Date & Time Received 8/6/24 @ 1405 Initials CJ

Laboratory Identification P&F 97627 - 97630

- | 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 present in VOA vials? |

Notes: _____

*Temperature upon receipt at the laboratory 5.8 °C

- internal sample kit thermometer infra-red thermometer