

ORGANIC ANALYSIS REQUEST FORM

PLEASE COMPLETE ALL APPLICABLE INFORMATION



State of Idaho
Bureau of Laboratories
2220 Old Penitentiary Rd.
Boise, ID 83712
208-334-2235
EPA No. ID00018

Customer / Agency Name:			
Mailing Address:			
City:		State:	Zip:
Attention:		Phone:	
Email:		Fax:	
Collector (if different than above):		Contact Phone #:	
Date Collected:		Time Collected: (24 hour clock)	
Additional copy of report sent to:			
Address:		City:	State: Zip:
Sample ID:		Sample Location: (Project Name/ Code/ Site):	

SAMPLE MATRIX

- | | | | |
|--|---|---------------------------------------|--|
| <input type="checkbox"/> Biological Tissue | <input type="checkbox"/> Drinking Water | <input type="checkbox"/> Ground Water | <input type="checkbox"/> Product / Formulation |
| <input type="checkbox"/> Soil/Sludge/Solid | <input type="checkbox"/> Surface Water | <input type="checkbox"/> Wastewater | <input type="checkbox"/> Other _____ |

UST / PETROLEUM

- RBDM – Gasoline - EPA 8260
- RBDM – Lube Oil - EPA 8270
- Total Petroleum Hydrocarbons - EPA 8260 / EPA 8270
- RBDM – Diesel - EPA 8270
- BTEX/ENM - EPA 8260
- PAH's - EPA 8270

RCRA HAZARDOUS MATERIALS

- TCLP / VOC's - EPA 1311/EPA 8260
- TCLP / SOC's - EPA 1311/EPA 8270

ADDITIONAL ORGANICS

- Volatile Organic Compounds* - 524.2 / 8260
- *Caution – VOC preservative dropper bottle contains hydrochloric acid**
- EDB/DBCP - 504.1 / 8011
- Organochlorine Pesticides & PCB's - 508.1 / 8081
- Chlorinated Herbicides - 515.4 / 8151a
- PAH's - 8270c
- Phenols - 8270c
- PCB Scan – 8081
- Semi-Volatile Organic Compounds - 8270c

OTHER ANALYSIS REQUESTED

CHAIN-OF-CUSTODY INFORMATION (When Required)

Relinquished by:	Date:	Time:	Received by:	Date:	Time:	Received with Seal Intact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Label Tag, COC Agree? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Get your forms on the web at: <http://www.healthy.idaho.gov>; select 'Lab Submission Forms'

LABORATORY USE ONLY

Shipper: Courier Walk In Received Temp. <4 RT Radiation Check: Y N
 Preservative(s): H₂SO₄ Neutral HNO₃ <4°C Other # Bottles / Sample: _____ Container Type: Cubi Nalgene
 Storage Location: M IW OW R VOC EM # Samples / Order: _____ Lab Sample #: _____
 Date Received: _____ Received By: _____ Lab Order ID: _____