Coastal Carolina University
Environmental Quality Lab
SCDHEC Lab Certification No. 26001

Chain-of-Custody Form
To be used only when sampler is field custodian

Project/Client: __________________________  Date of sampling: ____________  Sampled by: __________________________

Tidal stage: □ low(______)  □ high(______)  Approximate air temperature: __________ °F

Weather: □ sunny □ partly cloudy □ cloudy □ rainy □ windy(_______ mph, _______ direction)

Waves (ft): _______ □ Longshore flow(_______ direction, _______ strength)

Date of last rainfall: __________, _____ amount  □ Rainfall during sampling(_______ time began, _____ amount)

All samples preserved with ice in cooler immediately following sampling. Sample receipt temperature: ________ °C

Sample type: □ grab □ composite (start date/time:__________ end date/time:__________)

Program area: □ surface water (□ marine/estuarine □ fresh) □ ground water □ waste water

Sample matrix: □ liquid □ soil □ waste

BOD (Biochemical Oxygen Demand, 946 mL plastic); CHL/NUTR/TURB (Chlorophyll/Nutrients/Turbidity, 500 mL plastic);
COD (Chemical Oxygen Demand, 10 mL glass test tubes with 0.02 mL concentrated H$_2$SO$_4$), H$_2$SO$_4$ lot number:________;
ENT/FC (Enterococcus/Fecal coliform, 120 mL sterile plastic with sodium thiosulfate preservation), bottle lot number:________;
TSS/VSS (Total Suspended Solids/Volatile Suspended Solids, 1.89 L plastic)

Comments:________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Date of last rainfall: ____________, _____ amount  □ Rainfall during sampling(_______ time began, _____ amount)

Tidal stage: □ low(______)  □ high(______)  Approximate air temperature: ______ °F

Weather: □ sunny □ partly cloudy □ cloudy □ rainy □ windy(_______ mph, _______ direction)

Waves (ft): _______ □ Longshore flow(_______ direction, _______ strength)

Lab sample ID  Sampling location  Sample site ID  Time sampled (MIL hours)  Outlet flow  Collection temp °C  No. of bottles collected

<table>
<thead>
<tr>
<th>Lab sample ID</th>
<th>Sampling location</th>
<th>Sample site ID</th>
<th>Time sampled (MIL hours)</th>
<th>Outlet flow</th>
<th>Collection temp °C</th>
<th>No. of bottles collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>E23-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relinquished by (signature)  Date  Time (MIL)  Received by (signature)  Date  Time (MIL)

Relinquished by (signature)  Date  Time (MIL)  Received by (signature)  Date  Time (MIL)

Revision Date: 12/16/22  Form 1060-Blank  QA Reviewer __________ Date __________

Comments:________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________