

Petroleum Product Testing Sample Chain of Custody Form

Company/Client Name

Contact Person

Phone Number

Sample Location

Date/Time Collected

Collected By

Sample Description

Sample ID	Product Name / Type	Container Type	Volume	Testing Requested

Special Instructions / Comments

Laboratory Use Only

Date/Time Received	Received By	Condition	Remarks

Chain of Custody Record

Date/Time	Released By (Name/Signature)	Received By (Name/Signature)	Purpose/Remarks