Asbestos Bulk Chain of Custody Form

| Send to: DeLisle Associates LTD 5050 S Sprinkle Road, Portage, MI 49002 COC# | | |
|--|--------------------------|-------------------|
| Contact Person: Phone Number: | | |
| Address: Project Site Address: (if different that home address) | | |
| Sample Number | Sample Description | Sample Location |
| Example: 01 | Floor Tile | Upstairs Bathroom |
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| Comments: | Total Number of Samples: | |
| Print Name: | Date: | Time: |
| Signature: Email: | | |
| | | |
| For Lab Only | | |

Received by: ______ Date: _____ Time:_____