

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			WWTP APDES #: N/A PWS ID #: N/A Send Results to ADEC: <input type="checkbox"/> Yes <input type="checkbox"/> No Purchase Order/Charge Code:			Perservative Added										Requested TAT:																																																																																
Billing Address: 610 University Ave						<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="5" style="writing-mode: vertical-rl; transform: rotate(180deg);">Number of Containers</td> <td rowspan="5" style="writing-mode: vertical-rl; transform: rotate(180deg);">E. Coli SM9223B-QT</td> <td rowspan="5" style="writing-mode: vertical-rl; transform: rotate(180deg);">Fecal Coliform SM9222D</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><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><td></td><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><td></td><td></td><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><td></td><td></td><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><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>										Number of Containers	E. Coli SM9223B-QT	Fecal Coliform SM9222D																																																																														<input type="checkbox"/> Normal Turnaround <input type="checkbox"/> RUSH by: DATE: _____
Number of Containers	E. Coli SM9223B-QT	Fecal Coliform SM9222D																																																																																														
City, State, Zip: Fairbanks, Ak 99709																																																																																																
Phone: (907) 451-2347																																																																																																
Fax:																																																																																																
Email: jeff.fisher@alaska.gov																																																																																																
Project Name: Chena River Monitoring																																																																																																
Sampled By: <i>JF</i>																																																																																																
Sample Identification	Sample Date	Sample Time	Matrix	Lab ID#	Sub Lab ID#												Sample Comments																																																																															
Chena River Site 1 Duplicate	5/21/25	9:20A	W	PEF105365		2	X	X																																																																																								
Chena River Site 1	5/21/25	9:20A	W	PEF105366		2	X	X																																																																																								
Chena River Site 2	5/21/25	9:55A	W	PEF105367		2	X	X																																																																																								
Chena River Site 3	5/21/25	10:00A	W	PEF105368		2	X	X																																																																																								
Special Instructions/QC Requirements & Comments:												Sample Temperatures Pollen Env Temperature on arrival: <u>1.1</u> °C Sub Lab Temperature on arrival: _____ °C																																																																																				
Relinquished by: <i>[Signature]</i>			Company: DEC			Date & Time: 11:20A 5/21/25			Received by: <i>[Signature]</i>			Company: Pollen Env.			Date & Time: 5/21/25 @ 1120																																																																																	
Relinquished by:			Company:			Date & Time:			Received by:			Company:			Date & Time:																																																																																	
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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: 5/29/2025

Receipt Date: 5/21/2025

Sample Date: 5/21/2025

Sample Time: 9:20 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**

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

Pollen Env. Lab ID: **PEF105365**

COC #: **DEC Chena River**

Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

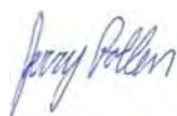
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/21/25 at 3:25 PM.
E. coli run started 5/21/2025 at 2:10 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	24.0	CFU/100mL	1.0	JKI	5/21/2025	
E. coli	SM9223B-QT	13.4	MPN/100mL	1.0	JKI	5/21/2025	



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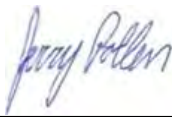
Report Date: 5/29/2025
 Receipt Date: 5/21/2025
 Sample Date: 5/21/2025
 Sample Time: 9:20 AM
 Sampled By: JF

Project / Location: **Chena River Monitoring**
 Client Sample ID: **Chena River Site 1 Duplicate**
 Pollen Env. Lab ID: **PEF105366**
 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 5/21/25 at 3:25 PM.
 E. coli run started 5/21/2025 at 2:10 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	26.0	CFU/100mL	1.0	JKI	5/21/2025	
E. coli	SM9223B-QT	8.5	MPN/100mL	1.0	JKI	5/21/2025	



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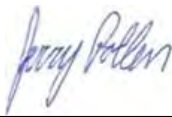
Report Date: 5/29/2025
 Receipt Date: 5/21/2025
 Sample Date: 5/21/2025
 Sample Time: 9:55 AM
 Sampled By: JF

Project / Location: **Chena River Monitoring**
 Client Sample ID: **Chena River Site 2**
 Pollen Env. Lab ID: **PEF105367**
 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 5/21/25 at 3:25 PM.
 E. coli run started 5/21/2025 at 2:10 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	20.0	CFU/100mL	1.0	JKI	5/21/2025	
E. coli	SM9223B-QT	9.8	MPN/100mL	1.0	JKI	5/21/2025	



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Fairbanks, AK 99709

Phone: (907) 451-2347

E-mail: jeff.fisher@alaska.gov

Report Date: 5/29/2025

Receipt Date: 5/21/2025

Sample Date: 5/21/2025

Sample Time: 10:20 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**

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

Pollen Env. Lab ID: **PEF105368**

COC #: **DEC Chena River**

Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

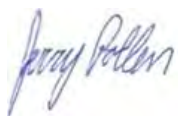
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/21/25 at 3:25 PM.
E. coli run started 5/21/2025 at 2:10 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	12.0	CFU/100mL	1.0	JKI	5/21/2025	
E. coli	SM9223B-QT	8.4	MPN/100mL	1.0	JKI	5/21/2025	



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SAMPLE RECEIPT CHECKLIST

Date & Time Received 5/21/25 @ 1120 Initials AMC

Laboratory Identification PEF105365 - 105368

- | 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 larger than 1/4" present in VOA vials? |

Notes: _____

*Temperature upon receipt at the laboratory 1.1 °C

- internal sample kit thermometer infra-red thermometer