



2625 Denison Drive
 Mt. Pleasant, MI 48858
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FTIR CHAIN OF CUSTODY No. _____

Page ___ of ___

Customer Contact Information	
Company Name:	Tester Name:
Send Invoice to:	Tester email:

Project Information	
Project Name:	Project No.:
Test Location:	

Line No.	Test Identification	TAT (see below)	Type of Validation Requested (please check all that apply)	Comments
1		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
2		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
3		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
4		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
5		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
6		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	
7		<input type="checkbox"/> STD <input type="checkbox"/> 2BD	<input type="checkbox"/> JJJJ <input type="checkbox"/> JJJJ + Formaldehyde <input type="checkbox"/> Formaldehyde Only <input type="checkbox"/> ZZZZ <input type="checkbox"/> NO + CO only <input type="checkbox"/> EPA M320 <input type="checkbox"/> Other If other, please explain in Comments Section	

Special Notes:

Custody

Turn Around Time (TAT)
STD: 10 business days (default)
2BD: 48 hrs post data receipt (1.5 x \$)

Relinquished By:	Date:	Time:

Received By:	Date:	Time:

Expedited TAT requires Prism approval

Records are retained for 7 years. Records older than seven years will be destroyed without notification