



CHAIN OF CUSTODY

Batch #:

11200 Kirkland Way #340A

Kirkland, WA 98033

(425) 496-4819

WATestingLLC.com

BULK ASBESTOS TEST ____ POINT COUNT (400/600/1000) ____ TAPE ____ LEAD ____ MOLD ____

Client Name: _____

Address: _____ City _____ ST _____ ZIP _____

Phone #: _____

Project Manager: _____ Email: _____

Project Manager Phone #: _____

Project Location/Job Name: _____

Address: _____ City _____ ST _____ ZIP _____

SAMPLES: Turn Around Time: _____ Number of samples: _____

Condition: Good ____ Damaged ____ Severe Damage ____

SEQ#	Sample Location	Sample Description	SEQ#	Sample Location	Sample Description
1			16		
2			17		
3			18		
4			19		
5			20		
6			21		
7			22		
8			23		
9			24		
10			25		
11			26		
12			27		
13			28		
14			29		
15			30		

	Print Name	Signature	Company Name	Date	Time
Sampled					
Relinquished					
Delivered					
Received			WAT		
Analyzed			WAT		
Reported			WAT		

How would you like to be notified?

Email ☒ _____

Phone _____

Washington Asbestos Testing LLC guarantees the test results provided are of a precision normal with the type of methods recognized in asbestos analysis. Washington Asbestos Testing LLC accepts no legal responsibility for the purpose for which the client uses the test results. By signing on this Chain of Custody form the client agrees to relieve Washington Asbestos Testing LLC of any and all liability that may arise from the test results.