

Requestor completes all items, obtains required approval signature and submits to Purchasing for processing.

[Send completed form to requisitions@ensafe.com](mailto:Send completed form to requisitions@ensafe.com)

**\*\*PLEASE NOTE: Page 1 (THIS PAGE) Does NOT go to the Labs. The following two pages are sent directly to the lab and this becomes your Statement of Work. Please complete all applicable fields as necessary.**

<b>Requestor</b>	<b>Employee Level</b>	<b>Office Location</b>	<b>Phone/Ext</b>	<b>Date Prepared</b>		
<b>Project No.</b>		<b>Project Manager</b>		<b>Estimated Cost</b>		
<p><b>Laboratory Contracting Process:</b></p> <p>(1) Projects exceeding \$7,500 will be competed among three qualified labs, unless a single/sole source justification is provided and approved by a Principal. The Requestor may designate which labs are preferred for bidding purposes. Purchasing will coordinate with the labs to confirm pricing, capacity and ability to process the samples.</p> <p>(2) LSRs will be issued to the selected lab on a PO against a Laboratory MSA and will be a part of and incorporated into the PO. Be sure to <u>include the PO number on all COC forms</u>. The Laboratory needs this information for tracking and invoicing purposes.</p> <p>(3) Be sure to <u>notify Purchasing when data is received late and/or if there are any problems with the analyses performed or data packages provided. Monetary damages may be assessed to the Lab when deliverables are received late, when data packages don't conform to the requirements set forth in this LSR, on the COC or when samples are lost or destroyed.</u></p>						
<p><b>Suggested Sources</b> – Three or more must be listed unless sole source. Please indicate if any labs listed below are preferred.</p>						
<p><b>Additional Information/Special Instructions for Buyer (NOT instructions for the laboratory):</b></p>						
<p><b>Non-Competitive (Single/Sole Source) Justification – Required for amounts over \$7,500</b></p> <p><input type="checkbox"/> The Client has directed EnSafe to use this Subcontractor for this project. Name &amp; Title of Client's Representative: _____</p> <p><input type="checkbox"/> The named Subcontractor is the only source capable of providing the required services/materials/equipment. Explanation and documentation attached as to the reason no other vendor can satisfy project requirements: _____ _____</p> <p><input type="checkbox"/> Identify any other vendors contacted: _____</p> <p><input type="checkbox"/> EnSafe is obligated to use this Subcontractor under the terms of a formal Teaming Agreement between EnSafe and the Subcontractor dated _____, 20____. Principal who approved Teaming Agreement: _____</p> <p><input type="checkbox"/> EnSafe and the Subcontractor are participating in a government-approved Mentor-Protégé program which permits EnSafe to use this Subcontractor on a sole-source basis.</p> <p><b>PM Approval:</b> _____ <b>Principal Approval:</b> _____</p> <p><b>E-Mail approval may serve as documentation for signatures</b></p> <table border="1"> <tr> <td><b>Spending Authority Approval:</b>  _____</td> <td><b>Chemist Approval:</b>  _____</td> </tr> </table> <p>Per EnSafe Book: L1/L2 &lt;\$5k, L3 &lt;\$25k, L4 &lt;\$100k, L5 &amp; Principal = or &gt;\$100k</p>					<b>Spending Authority Approval:</b>  _____	<b>Chemist Approval:</b>  _____
<b>Spending Authority Approval:</b>  _____	<b>Chemist Approval:</b>  _____					



<b>Project Name</b>	<b>Project No.</b>	<b>Phase</b>	<b>Task</b>
<b>Site Location</b>	<b>Site Phone Number (if available)</b>		
<b>Project Manager</b>	<b>Project Chemist</b>		
<b>Ship Bottles &amp; Coolers to (Name)</b>	<b>Send Results to Name</b>	<b>E-mail Address</b>	
<b>Container Shipping Address</b>	<b>Data Shipping Address</b>		
<b>Date Sample Bottles Must Be Delivered</b>	<b>Expedited Bottles Required</b> <input type="checkbox"/> No <input type="checkbox"/> Yes (see note*)		
<b>Anticipated Sampling Start Date</b>	<b>Anticipated Sampling End Date</b>		
<b>Estimated Sample Deliver Schedule (Qty of Samples and Frequency of Deliveries to Lab):</b>			
<b>Special Detection Limit Requirements:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes – Specified Below <input type="checkbox"/> Yes – Screening Levels Attached <hr/> <p style="color: red;">If screening levels are identified, the lab will provide reporting limits (RL) and method detection limits (MDL) for all requested methods and identify which analytes are not below the site screening levels. If either the RL or MDL cannot meet the screening levels, the laboratory must identify which chemicals cannot be met and/or provide alternative analytical method option(s) that can reach the required screening level (if any).</p>			
<b>List Special Federal/State Certification Requirements – Lab shall specify whether any method requested is not accredited through the following State Agency or NELAP Accreditation authority:</b> <hr/>			
<b>Minimum Detection Limit Requirement – Undetected values are to be reported as follows:</b> <input type="checkbox"/> Lab's normal reporting limits (RL) (No J-flags) <input type="checkbox"/> Normal RLs WITH J-flags (Between MDL and RL J-flagged) <input type="checkbox"/> Method Detection Limits (MDL) (Lowest limits required for NJ, TX, & FL)			
<b>Hardcopy Deliverable Requirement (Mark as needed – May be more than one)</b>		<b>Data Recipient</b>	
<input type="checkbox"/> Rush/Preliminary Electronic Data Summaries (email - Final report to follow)			
<input type="checkbox"/> PDF Data Package (Level 2 – email unlocked searchable pdf only) (email)			
<input type="checkbox"/> PDF Data Package (Level 3 or 4 – Bookmarked, unlocked ,searchable pdf) (email preferred)			
<input type="checkbox"/> Paper Data Package (If required by client/contract) Quantity: _____			
<b>Electronic Data Deliverable Requirement</b> <input type="checkbox"/> None <input type="checkbox"/> EnSafe 3-file EQuIS (Default) <input type="checkbox"/> EnSafe ESBASIC   Other (Specify): _____			
<b>Other Information Required for Laboratory Project Manager (Check all that apply and attach additional specifications as necessary)</b> <input type="checkbox"/> Provide Additional Bottles for Breakage <input type="checkbox"/> Provide Laboratory Blank System Water   Quantity: _____ <input type="checkbox"/> Report Soil Results on a <u>Wet Weight</u> Basis ( <i>Dry weight is required on all solid samples unless otherwise specified here</i> ) <input type="checkbox"/> MS/MSD Required on Site Samples <input type="checkbox"/> Report Batch MS/MSD <input type="checkbox"/> State-specific QA/QC documentation/form is required.   Specify: _____			

\*Note: The Laboratory is expected to make every effort to expedite only the quantity of bottles necessary to begin sampling; remaining bottles should be shipped using normal ground transportation. Lab will not be reimbursed for unnecessary or excessive airfreight costs (i.e., FedEx, UPS, etc.) The Laboratory PM is cautioned to coordinate with samplers in determining the quantity of bottles that should be expedited.

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**Additional Project Specifications**

**List of Attachments**

## Table of Analytical Requirements

**Lab** - Enter unit prices for each item using the current Pricing Catalog (if applicable for MSA Labs), or discount prices may be offered which will apply to this LSR only.

[illegible]



Est. Air Freight Cost <sup>a</sup> :		
Est. Total Cost:		

<sup>a</sup>Unit prices include ground transportation costs; airfreight is reimbursed only for expedited shipping of sample containers when required by EnSafe

## Table of Analytical Requirements (Page 2)

**Lab** - Enter unit prices for each item using the current Pricing Catalog (if applicable for MSA Labs), or discount prices may be offered which will apply to this LSR only.

[illegible]



Est. Air Freight Cost <sup>a</sup> :		
Est. Total Cost:		

<sup>a</sup>Unit prices include ground transportation costs; airfreight is reimbursed only for expedited shipping of sample containers when required by EnSafe