

**PAINT CHIP SAMPLING FOR LEAD—for homeowners' information**

1. Sample of paint chip should be approximately the size of a quarter
2. Place paint sample for each area in a separate Ziploc bag, labeled with location.
3. Fill out chain of custody with complete information, including sample locations, date & time collected, etc.
4. Send samples with chain of custody documentation to laboratory for testing.
5. Include payment with samples.
6. If you have volumes of 5 or more samples submitted at the same time—call for volume discounts.
7. Please complete information below:

(Please fill out information below **COMPLETELY** and include with samples & payment-unless prepaid)

Property Street Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date/Time Sampled: \_\_\_\_\_

Area Sampled (kitchen cabinet, living room wall, etc.) \_\_\_\_\_

Name of person sampling: \_\_\_\_\_

Company/Agency: \_\_\_\_\_ Phone#: \_\_\_\_\_

Fax or Email Report to: \_\_\_\_\_

**PAYMENT INFORMATION — (IF NOT PREPAID)**

Please enclose your payment of \_\_\_\_\_ per sample X \_\_\_\_\_ samples = Total of \$ \_\_\_\_\_  
(If more than 5 samples, call for volume pricing.)

Form of payment: check: # or money order#: \_\_\_\_\_ (Please make checks payable to: Mid-Atlantic Laboratories, Inc.)

Credit card \_\_\_\_\_ call with card information: 804-742-5577

You may **deliver** / or **ship by UPS/FedEx** your samples directly to **Mid-Atlantic Laboratories, Inc.** at:  
**224 Main St., Ste. 1, Port Royal, VA 22535**

OR...you may **mail your samples by US Mail** to:  
**P.O BOX 817, King George, VA 22485**  
**PHONE #: 804-742-5577**

\*\*\*\*\*LAB USE ONLY\*\*\*\*\*

DATE/TIME REC'D IN LAB: \_\_\_\_\_  
BY: \_\_\_\_\_

LAB PROJECT #: \_\_\_\_\_

DUE DATE: \_\_\_\_\_  
RUSH? \_\_\_\_\_

PAID BY: Check #: \_\_\_\_\_ C/G: \_\_\_\_\_

OTHER: \_\_\_\_\_ AMT. PD.: \_\_\_\_\_

DATE PD.: \_\_\_\_\_ REC'D BY: \_\_\_\_\_