



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
PUBLIC WATER SUPPLY CHAIN OF CUSTODY RECORD

# Lead and Copper

Name of Public Water System:  
Water System Identification Number:

Where the sample was taken  
– address or person's name

OrderID:  
Contact:

Name of the person who took the sample.

Sample Number	Lab Number	Sampling Location	Date Sampled	Time Sampled	Tier (See Attachment)	Sampler Name (Please Print)
AC68459	XXXXXXXXXXXXXXXXXXXX					
AC68460	XXXXXXXXXXXXXXXXXXXX					
AC68461	XXXXXXXXXXXXXXXXXXXX					
AC68462	XXXXXXXXXXXXXXXXXXXX					

Address Correction (Fill out if address has changed) Name of person you are replacing:

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Describes the type of plumbing in the home.

**DNR Employees Only##### DO NOT WRITE BELOW THIS LINE##### DNR Employees Only**

Container Opened and Reviewed at Lab by: _____	Date: _____	Time: _____
Transportation Method: UPS, FedEx, USPS, Other: _____	Correct sampling method used.	
Samples submitted with a chain of custody.	Containers were intact when received.	
Bottle caps tight and securely in place.	Volume of samples submitted are sufficient for the requested tests.	
Samples are within the holding time for the requested test(s).		