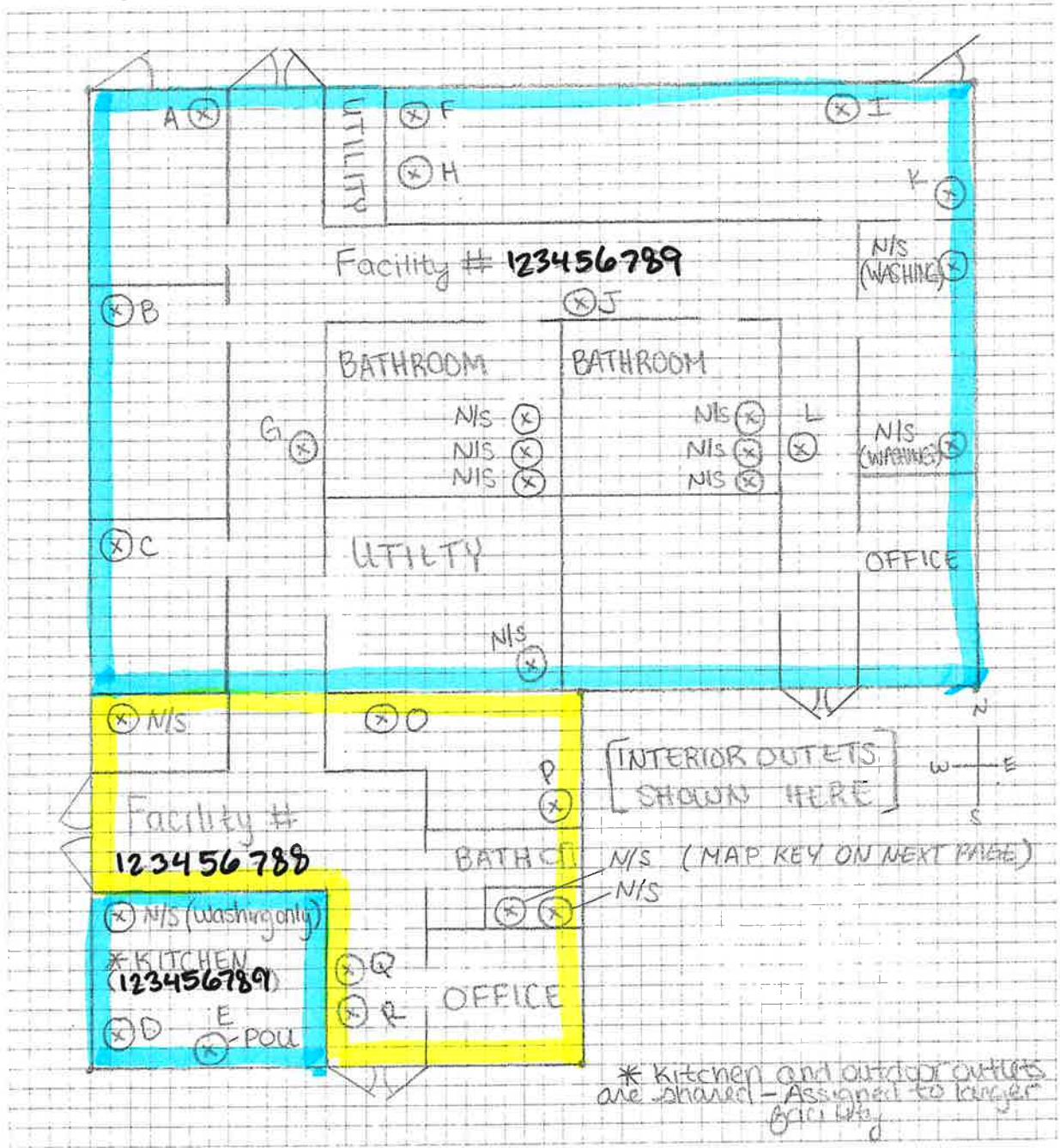


### FACILITY SKETCH (Floor Plan)

Applicants are required to provide a sketch of the floor plan of the home or facility and outside yard. The floor sketch must label rooms such as the kitchen, bath, living room, etc. Circle the names of the rooms that will be used by staff/residents/clients/children. Door and window exits from the rooms must be shown in case of an emergency (see Emergency Disaster Plan). Show room sizes (e.g. 8.5 x 12). Keep close to scale. Use the space below. See back for yard sketch.

FACILITY NAME: CHILD COMBO CARE COMPANY ADDRESS: 123 B Street Big City, CA 91000

Facility numbers : 123456788, 123456789



(SEE "YARD" SKETCH FOR OUTDOOR OUTLETS)

## FACILITY SKETCH (Yard)

The yard sketch should show all buildings in the yard including the home (with no detail), garage and storage building. Include walks, driveways, play area, fences, gates. Show any potential hazardous area such as pools, garbage storage, animal pens, etc. Show the overall yard size. Try to keep the sizes close to scale. Use the space below.

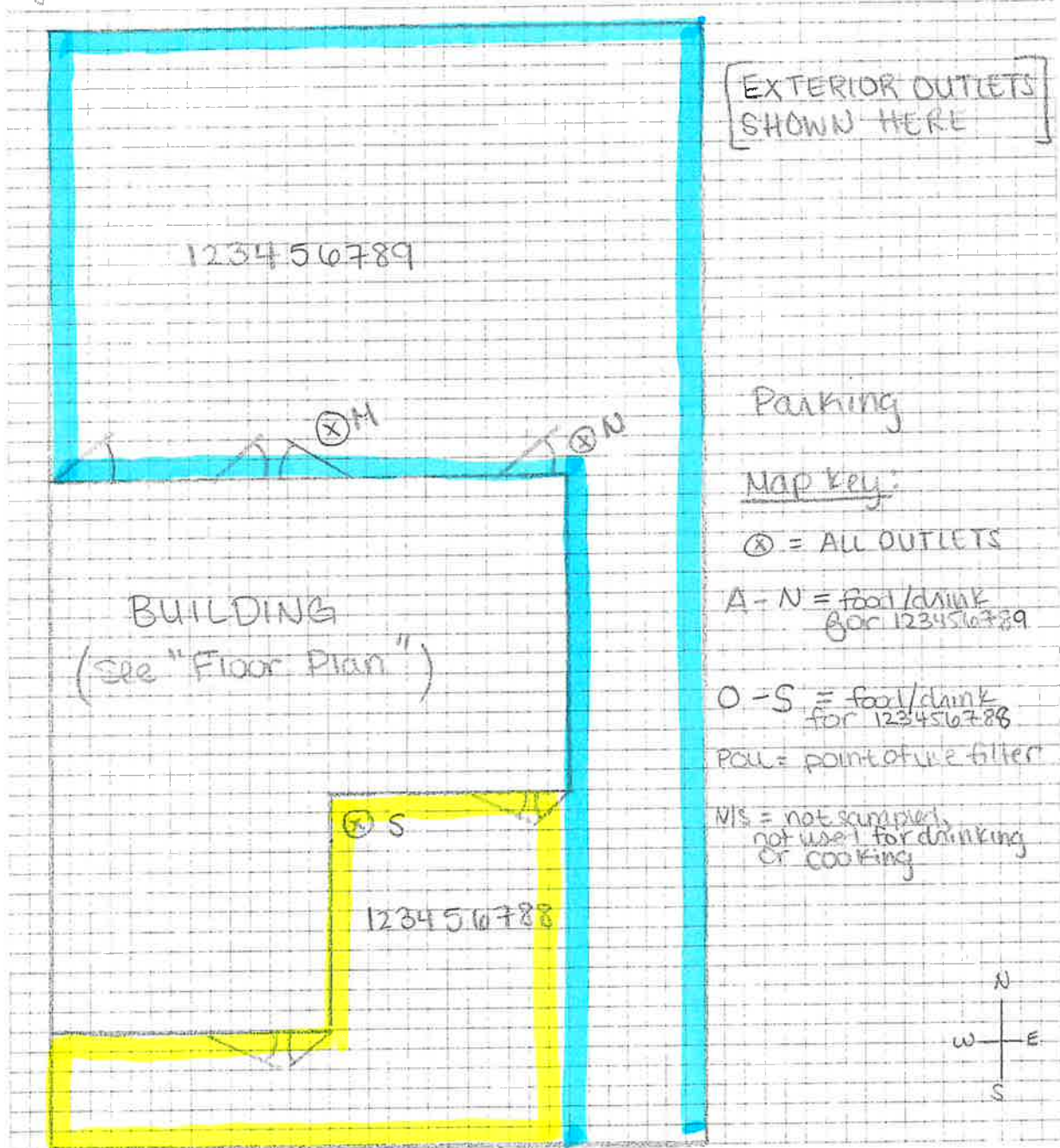
FACILITY NAME:

Child Combo Care Company

ADDRESS

123 B st. Big City, CA 91000

Facility numbers: 123456789, 123456788



## FACILITY SKETCH (Floor Plan)

Applicants are required to provide a sketch of the floor plan of the home or facility and outside yard. The floor sketch must label rooms such as the kitchen, bath, living room, etc. Circle the names of the rooms that will be used by staff/residents/clients/children. Door and window exits from the rooms must be shown in case of an emergency (see Emergency Disaster Plan). Show room sizes (e.g. 8.5 x 12). Keep close to scale. Use the space below. See back for yard sketch.

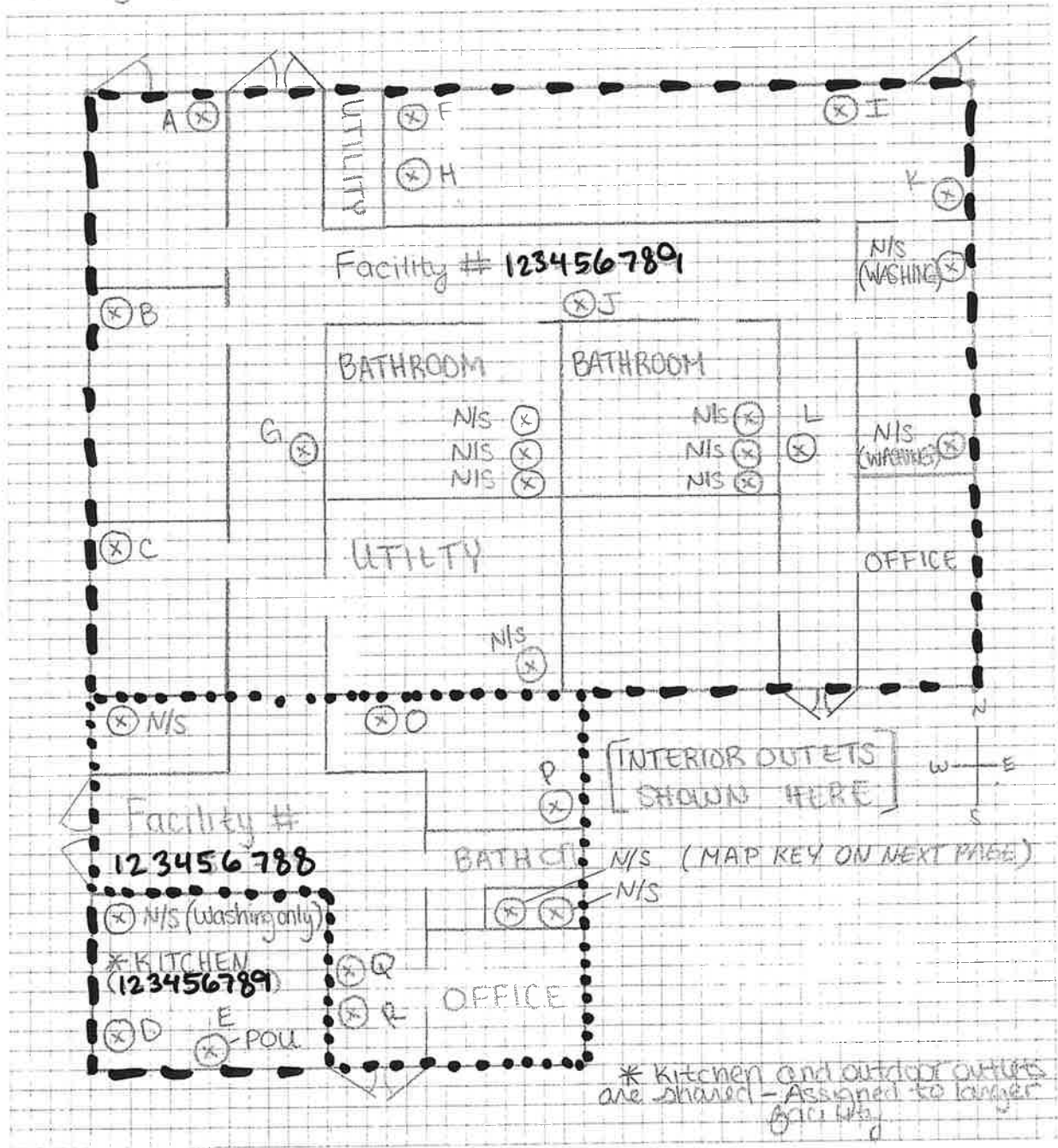
FACILITY NAME:

CHILD COMBO CARE COMPANY

ADDRESS:

123 B Street Big City, CA 91000

Facility numbers : 123456788, 123456789



(SEE "YARD" SKETCH FOR OUTDOOR OUTLETS)

## FACILITY SKETCH (Yard)

The yard sketch should show all buildings in the yard including the home (with no detail), garage and storage building. Include walks, driveways, play area, fences, gates. Show any potential hazardous area such as pools, garbage storage, animal pens, etc. Show the overall yard size. Try to keep the sizes close to scale. Use the space below.

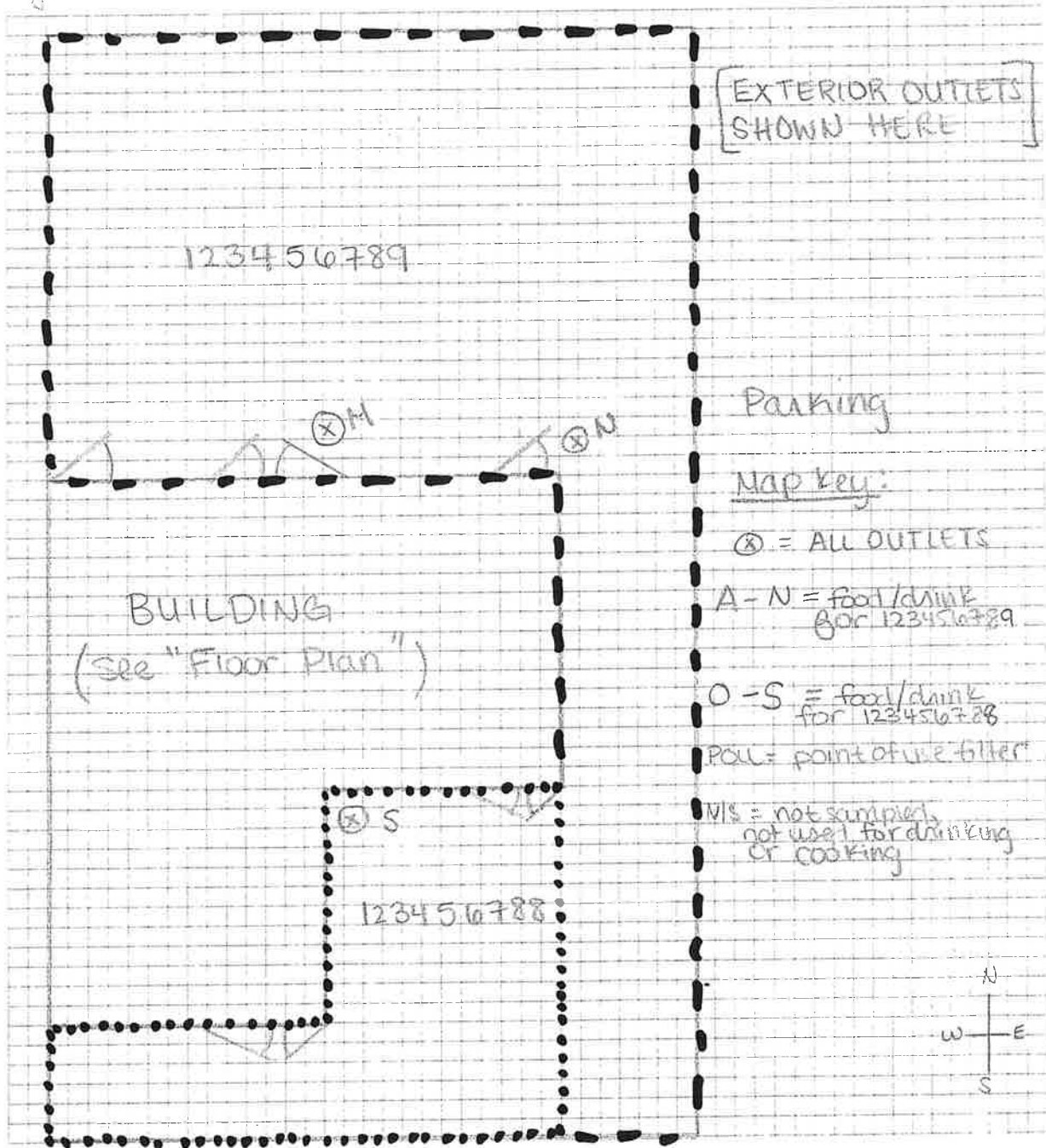
FACILITY NAME:

Child Combo Care Company

ADDRESS:

123 B st. Big City, CA 91000

Facility numbers: 123456789, 123456789



Analytical Laboratory Name

1234 Analysis St., Commercial City,  
CA 99999

\*Required Fields

**Turnaround Time Request**

- Standard - 10 business days
  - Rush (Surcharge may apply)
- Date needed:

**ANALYTICAL  
CHAIN OF CUSTODY**

Temp: \_\_\_\_\_ Thermometer ID: \_\_\_\_\_

<b>Company/Client Name*:</b> <b>Child Combo Care Company</b>	<b>Report Attention*:</b> Joe Sampler Additional cc's:	<b>Invoice To*:</b> Joe Sampler PO#:	<b>Phone*:</b> 123-456-7890 <b>Fax:</b> 123-456-7890 <b>E-mail*:</b> joe.sampler@email.com
---	--	--	--

<b>Address*:</b> 123 B Street	<b>City*:</b> Big City	<b>State*:</b> CA	<b>Zip*:</b> 91000
----------------------------------	---------------------------	----------------------	-----------------------

<b>Project:</b> Lead Sampling in Combination Child Care Centers	<b>Project #:</b>
--	-------------------

<b>Reporting Options:</b> <input type="checkbox"/> Trace (J-Flag) <input type="checkbox"/> Swamp <input checked="" type="checkbox"/> EDD Type: <u>CSV</u>	<b>Regulatory Carbon Copies</b> <input type="checkbox"/> SWRCB (Drinking Water) <input type="checkbox"/> Merced Co <input type="checkbox"/> Fresno Co <input type="checkbox"/> Madera Co <input type="checkbox"/> Tulare Co <input type="checkbox"/> Other: _____	<b>Regulatory Compliance</b> <input checked="" type="checkbox"/> EDT to California SWRCB (Drinking Water) System Number*: _____ <input type="checkbox"/> Geotracker #: _____
--	---	---

Matrix Types: SW=Surface Water BW=Bottled Water GW=Ground Water WW=Waste Water STW=Storm Water DW=Drinking Water SO=Solid

#	Sample Description*	Sampled*		Matrix*	Comments / Station Code / WTRAX	Lead 200.8 RL=1ppb												
		Date	Time															
1	Sample Site # A	5/23/22	0600	DW	123456789 A	X												
2	Sample Site # B	5/23/22	0604	DW	123456789 B	X												
3	Sample Site # C	5/23/22	0607	DW	123456789 C	X												
4	Sample Site # D	5/23/22	0610	DW	123456789 D	X												
5	Sample Site # E	5/23/22	0612	DW	123456789 E	X												
6	Sample Site # F	5/23/22	0615	DW	123456789 F	X												
7	Sample Site # G	5/23/22	0622	DW	123456789 G	X												
8	Sample Site # H	5/23/22	0628	DW	123456789 H	X												
9	Sample Site # I	5/23/22	0629	DW	123456789 I	X												
10	Sample Site # J	5/23/22	0632	DW	123456789 J	X												
11	Sample Site # K	5/23/22	0638	DW	123456789 K	X												
12	Sample Site # L	5/23/22	0642	DW	123456789 L	X												
13	Sample Site # M	5/23/22	0644	DW	123456789 M	X												
14	Sample Site # N	5/23/22	0648	DW	123456789 N	X												

<b>Relinquished by: (Signature and Printed Name)</b> Joe Sampler	<b>Company</b> H2O Sampling	<b>Date</b> 5/23/22	<b>Time</b> 5:04pm	<b>Received by: (Signature and Printed Name)</b>	<b>Company</b>
<b>Relinquished by: (Signature and Printed Name)</b>	<b>Company</b>	<b>Date</b>	<b>Time</b>	<b>Received by: (Signature and Printed Name)</b>	<b>Company</b>
<b>Received for Lab by: (Signature and Printed Name)</b>	<b>Date</b>	<b>Time</b>	<b>Payment Received at Delivery:</b>		<b>Check / Cash</b>
			<b>Date:</b>	<b>Amount:</b>	<b>PIA#:</b> <b>Init.</b>

**Shipping Method:**    ONTRAC    UPS    GSO    WALK-IN    FED EX    Courier: \_\_\_\_\_    **Custody Seal:** Y / N

**Cooling Method:**    Wet    Blue    None    **Chilling Process Begun:** Y / N

Payment for services rendered as noted herein are due in full within 30 days from the date invoiced. If not so paid, account balances are deemed delinquent. Delinquent balances are subject to monthly service charges and interest. The person signing for the Client/Company acknowledges that they are either the Client or an authorized agent to the Client and that the Client agrees to be responsible for payment for the services on this Chain of Custody.

Analytical Laboratory Name

1234 Analysis St., Commercial City,  
CA 99999

\*Required Fields

**Turnaround Time Request**

- Standard - 10 business days
  - Rush (Surcharge may apply)
- Date needed:

**ANALYTICAL  
CHAIN OF CUSTODY**

Temp:

Thermometer ID:

<b>Company/Client Name*:</b> <b>Child Combo Care Company</b>	<b>Report Attention*:</b> Joe Sampler Additional cc's:	<b>Invoice To*:</b> Joe Sampler PO#:	<b>Phone*:</b> 123-456-7890	<b>Fax:</b> 123-456-7890	<b>E-mail*:</b> joe.sampler@email.com
---	--	--	--------------------------------	-----------------------------	---------------------------------------

<b>Address*:</b> 123 B Street	<b>City*:</b> Big City	<b>State*:</b> CA	<b>Zip*:</b> 91000
----------------------------------	---------------------------	----------------------	-----------------------

<b>Project:</b> Lead Sampling in Combination Child Care Centers	<b>Project #:</b>	<b>Reporting Options:</b> <input type="checkbox"/> Trace (J-Flag) <input type="checkbox"/> Swamp <input checked="" type="checkbox"/> EDD Type: <u>CSV</u>	<b>Regulatory Carbon Copies:</b> <input type="checkbox"/> SWRCB (Drinking Water) <input type="checkbox"/> Merced Co <input type="checkbox"/> Fresno Co <input type="checkbox"/> Madera Co <input type="checkbox"/> Tulare Co <input type="checkbox"/> Other:	<b>Regulatory Compliance:</b> <input checked="" type="checkbox"/> EDT to California SWRCB (Drinking Water) System Number*: _____ <input type="checkbox"/> Geotracker #: _____
<b>Sampler Name (Printed/Signature)*:</b> <b>Joe Sampler</b>				

Matrix Types: SW=Surface Water BW=Bottled Water GW=Ground Water WW=Waste Water STW=Storm Water DW=Drinking Water SO=Solid

#	Sample Description*	Sampled*		Matrix*	Comments / Station Code / WTRAX	Lead 200.8 RL=1ppb											
		Date	Time														
15	Sample Site # O	5/23/22	0649	DW	123456788 O	X											
16	Sample Site # P	5/23/22	0652	DW	123456788 P	X											
17	Sample Site # Q	5/23/22	0658	DW	123456788 Q	X											
18	Sample Site # R	5/23/22	0700	DW	123456788 R	X											
19	Sample Site # S	5/23/22	0702	DW	123456788 S	X											
20	Sample Site # F - Flushed	5/23/22	0708	DW	123456789 F30	X											
21	Sample Site # R - Flushed	5/23/22	0710	DW	123456788 R30	X											
	Stagnation Start Time: <u>1800 hrs 5/22/22</u>																

Relinquished by: (Signature and Printed Name) <b>Joe Sampler</b>	Company <b>H2O Sampling</b>	Date	Time	Received by: (Signature and Printed Name)	Company
Relinquished by: (Signature and Printed Name)	Company	Date	Time	Received by: (Signature and Printed Name)	Company
Received for Lab by: (Signature and Printed Name)		Date	Time	Payment Received at Delivery:	Check / Cash
		Date:		Amount:	PIA#: Init.

**Shipping Method:** ONTRAC    UPS    GSO    WALK-IN    FED EX    Courier: \_\_\_\_\_    **Custody Seal: Y / N**

**Cooling Method:** Wet    Blue    None    **Chilling Process Begun: Y / N**

Payment for services rendered as noted herein are due in full within 30 days from the date invoiced. If not so paid, account balances are deemed delinquent. Delinquent balances are subject to monthly service charges and interest. The person signing for the Client/Company acknowledges that they are either the Client or an authorized agent to the Client and that the Client agrees to be responsible for payment for the services on this Chain of Custody.