

	MycoVeil Environmental Testing		Inspector Name:				
	Chain of Custody Form		Property Address:				
	Send both this form and the samples to the following address:		Client Contact Info:				
	3733 S State Route 159, Glen Carbon, IL 62034 Box 404		Date:			Order Number:	
To be filled out by MycoVeil Environmental Testing:							
Sample ID Format: [A-Z][##] Each new location will change the letter. Multiple samples from same location will change the #.	Sample Type	Tube/Container	Location in Home	Surface Type	Macroscopic Description (Color Texture Growth Pattern Moisture)	Odor / Notes	Photo Taken? (Y/N)
A01, A02, B01, etc...	Tape Lift Bulk Air	15 mL 50 mL Whirl-Pak Ziploc Tape	Basement Attic Crawlspace Bathroom Kitchen	Drywall Wood Carpet Insulation Other	Black Fuzzy Circular Damp	Musty odor, water stain nearby	Y / N