

**COLORADO DEPARTMENT OF TRANSPORTATION**  
**DEICER SAMPLE CHAIN OF CUSTODY**

**Instructions:** CDOT maintenance personnel collecting deicer product sample complete **Section 1**. CDOT maintenance personnel and Vendor making delivery complete **Section 2**. All persons releasing/accepting sample custody complete chain of custody complete Section 3. Print and retain this form with physical sample; when testing is complete send to CDOT Division of Mtce & Operations.

**Section 1- Sample Collection (Completed by CDOT maintenance personnel)**

Sample Collector Name		Region	Section	Patrol	Location Collected
CDOT Tracking Number	4-Digit Patrol #	MMDDYY	Order Number	<i>Carry tracking number to next page</i>	
Product Type	Liquid	Granular			
<b>Vendor</b>		<b>Product</b>			
Envirotech	Apex	Ice Slicer			
Desert Mountain	Torch IB (Ice Ban 305)	Rocanville			
GMCO	Torch LT (NexGen Torch)	Rapid Thaw			
Other:	Product Name	Vendor			
CDOT Brine	Production Location	Date Produced	Salt Used		
Vendor Bill of Lading #					
Lot Number	Date/Time Sampled	Date	Time		
Sample Specific Gravity	Temperature	°F			
Field Notes (Optional):					

**Section 2- Vendor Release (Completed by Vendor and CDOT)**

(Vendor) My signature below corroborates the deicer sample taken from the delivery as documented on attached Delivery Order Form/Bill of Lading was collected by CDOT Maintenance Personnel adhering to the most recent CDOT **Deicer Testing Protocol** and Existing CDOT Standards for Deicing Products, Liquid and Granular editions.

Vendor Relinquishing Sample	Date	Time	Name	Signature
CDOT Personnel Accepting Sample	Date	Time	Location	Signature

**Contact Information**

<b>CDOT Deicer Testing Program</b> <b>CDOT Headquarters - Division of Mtce &amp; Operations</b> <b>2829 W. Howard Place, 4th Floor</b> <b>Denver, CO 80204</b> <b>O (303) 512-5504 C (720) 501-7019</b> <a href="http://connectsp/statewide/mtceops/winter/Deicer/SitePages/Home.aspx">http://connectsp/statewide/mtceops/winter/Deicer/SitePages/Home.aspx</a>	<b>Test Facility</b> Analytical Laboratories, Inc. (ALI) Attn: James Hibbs 1804 N. 33rd Street Boise, ID 83703 (208) 342-5515
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**Section 3 – Chain of Custody (Completed by all persons who handle sample)**

Sample Tracking Number				Product Name	
1	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
2	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
3	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
4	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
5	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
6	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
7	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
8	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
9	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature
10	Releasing Sample Name Position	Date	Time	Location	Signature
	Accepting Sample Name Position	Date	Time	Location	Signature