



**SCRAP TIRE PROGRAM**  
**MOSQUITO SURVEY CHAIN OF CUSTODY FORM**

|                           |  |
|---------------------------|--|
| <b>SITE NAME:</b>         | <b>SITE REGISTRATION NO:</b>                     |
| <b>LOCATION ADDRESS:</b>  | <b>CITY:</b>                                     |
| <b>SAMPLE TAKEN BY:</b>   | <b>SAMPLE IDENTIFICATION NO:</b>                 |
| <b>DATE SAMPLE TAKEN:</b> | MONTH-DAY-LAST 5 REG #-SAMPLE # (MM-DD-#####-##) |

**SAMPLES MUST BE SIGNED FOR WITH EACH TRANSFER OF CUSTODY**

|                            |                 |       |
|----------------------------|-----------------|-------|
| SAMPLE RECEIVED AT (DEPT): | BY (SIGNATURE): | DATE: |
| SAMPLE RECEIVED AT (DEPT): | BY (SIGNATURE): | DATE: |
| SAMPLE RECEIVED AT (DEPT): | BY (SIGNATURE): | DATE: |
| SAMPLE RECEIVED AT (DEPT): | BY (SIGNATURE): | DATE: |

**DESCRIPTION OF AREA:**  SUN  SHADE  BOTH  URBAN  SUBURBAN  RURAL

|                            |   |
|----------------------------|---|
| <b>SKETCH MAP OF SITE:</b> | <b>DESCRIPTION OF MOSQUITO HABITAT:</b> |
|----------------------------|---|

|                 |                                |
|-----------------|--------------------------------|
| <b>ACREAGE:</b> | <b>I.D. INFORMATION (MDCH)</b> |
|-----------------|--------------------------------|

|                   |              |
|-------------------|--------------|
| <b>SIGNATURE:</b> | <b>DATE:</b> |
|-------------------|--------------|