

**Sealed Primary Container Descriptions Form**

Submitter's Ref No.:	Delivery No.:	COC No.:	Case No.:	Request Form No.:
----------------------	---------------	----------	-----------	-------------------

No	MDU No.	Submitter's Sample ID No.	Primary <u>Container</u> Descriptions	Details of Sealings			Seal condition on arrival at MDU			Photo at MDU	
				Seal Y/N	Seal Type	Seal ID	Initialed?	Complete?	Intact?	Y/N	Ref
1											
2											
3											
4											
5											

Record completed by (Name):			Signature:				Date:		Time		
Transport container							MDU Photographer:				
Type	Sealed? Y/N	If Yes, check details on related Chain of Custody form				Initials	Date	Time			

Note: Grey Areas – for MDU use only

Continued overleaf  Tick if more details on reverse of