



## Private Water Sample Request

Water samples are taken on Monday or Wednesday afternoons as our lab picks up on Tuesday and Thursday mornings, except the 5<sup>th</sup> Thursday of the month. Standard turnaround time for Total Coliform is typically 2-3 business days, whereas lead and/or Nitrate/Nitrite results can take *up to two (2) weeks* to receive. Rush turnaround may be available if needed; please contact this department for pricing and availability.

<b>Please indicate the reason for sample:</b> <input type="checkbox"/> Personal Knowledge <input type="checkbox"/> Realty <input type="checkbox"/> Refinance <input type="checkbox"/> Foster/Adoption	<b>Type of Private Water System (PWS)?:</b> <input type="checkbox"/> Well <input type="checkbox"/> Pond <input type="checkbox"/> Spring <input type="checkbox"/> Cistern <input type="checkbox"/> Hauled Water
<b>Analysis Requested:</b> <input type="checkbox"/> Total Coliform (Bacteria) <input type="checkbox"/> Lead <input type="checkbox"/> Nitrate/Nitrite	<b>Do you need results rushed?</b> (Additional fees will apply): <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Property Owner:</b> _____	<b>Phone:</b> _____
<b>Property Address:</b> _____	<b>City/Zip:</b> _____
<b>Requesting Party:</b> <input type="checkbox"/> Same as above	<b>City/State/Zip:</b> _____
_____	
<b>Email:</b> _____	<b>Property Township:</b> _____
<b>How would you like to receive results <u>in addition</u> to a phone call?</b> Check all that apply: <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Do not call	

**Please list all additional parties to receive results other than above:**    N/A

Name/Relationship:	Email or Mailing Address:
Name/Relationship:	Email or Mailing Address:
Name/Relationship:	Email or Mailing Address:
Name/Relationship:	Email or Mailing Address:
Name/Relationship:	Email or Mailing Address:

**OFFICE USE ONLY BELOW THIS LINE**

<b>First Sample</b>			
Sample Taken By:	Sample Date:	Receipt#	
Blue File Copy: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fees Rec'd By:	Amount Paid:	Date Paid:
<b>Second Sample</b> N/A <input type="checkbox"/>			
Sample Taken By:	Sample Date:	Blue File Copy: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Blue File Copy: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fees Rec'd By:	Amount Paid:	Date Paid: