

Pella Water Treatment Plant Laboratory

Sample ID Number# _____

Chain Of Custody Record

(Please fill out completely)

Report To:

Name: _____

Bill To:

Name: _____

Public Supply Information:

PWS No. _____

Address: _____

Address: _____

Address: _____

City/State: _____

City/State: _____

City/State: _____

Zip: _____

Zip: _____

Zip: _____

Phone: _____

Phone _____

Phone: _____

Sample

Requested Analysis (check all that pertain)

Source: _____

_____ Total Coliform Bacteria \$ 10.00

Sampler _____

_____ Fluoride \$ 12.00

Time _____

_____ Bacteria and Fluoride \$ 20.00

Date _____

For Safe Drinking Water Act Monitoring Only

_____ Routine

_____ Special

_____ Check

Relinquished By: _____

Time/Date: _____

Received By: _____

Time/Date: _____

Planted By: _____

Time/Date: _____

Test Results: Total Coliform Bacteria **Present** () **Absent** () E- Coli Bacteria (+) / (-)

Nitrate _____ mg/L Safe () Unsafe () Fluoride _____ mg/L

Sampling Instructions

1. The bacterial sample bottle is sterilized and care should be taken to insure that it is not contaminated during sampling.
2. Remove faucet aerator and washer.
3. Rinse faucet with a household bleach solution to sanitize the outside of the faucet.
4. Allow the tap to run for 3 - 5 minutes before sampling.
5. Slow sampling stream and take care to fill container to the 100ml mark. **DO NOT RINSE OUT THE SAMPLE BOTTLE.** Bottles may contain preservatives.
6. Fill out the top of this form and return to the lab for analysis within 24 hours.

Pella Water Treatment Plant Lab only certifies the results for the sample of water tested.