

2517 East Evergreen Blvd. Vancouver, WA 98661 (360) 750-0055

www.bskassociates.com

Turnaround Time Request										
Standard	3 business days for P/As									
	5 business days for 1x10s									
Rush (Surcharge may apply)										
Date need	ded:									

MICROBIOLOGY CHAIN OF CUSTODY

		*Required Fields	Temp	(° C):	IR ID#:				Ра	ige _		_ 0	Г																				
		Report	Attention*:				Invoi	ice T	Го*:									Dha	*														
										Phone								ne ⁻	:														
			Additiona	al cc's:				PO#:											E	: ! *													
Address*: City*:				41.4*	State*: Zip*:											E-m	ıaıı	-	Пн)W W(uld w	ou lik	e vour	r comr	oleted i	esult	e sen	t2					
Auu	iress :		Ci	ty:	State": ZIp":							Type of Water System (check only or):		"	How would you like your completed results sent? E-Mail Mail(Fee will be applied)										
Proje	act:			Project t	Project #:								Group A Group B												■ E-Mail ■ Mail(Fee will be applied) up A and B systems - Provide from Water Facilities ID (WF								
i ioje	501.			1 TOJECT 7	i roject #.						Gloup A G						Oroup	7B Culei				ID #:											
													RAW Source #								System N												
Sar	mpler Name (P	rinted / Signature)*:		l			provid	ed in 3	busines	ss day	s. Oth	er repo	rting a	rrangen	nents ca	an be n	nade for	an ac	dditional	fee. A	II sample	n report es submi nes or se	tted for	Cour	ty*:								
IF S	AMPLE IS COLIFO	RM POSITIVE CONTACT*		(Optiona	(Optional)													4			R	Repeat Sample					Samp	le					
1st C	Contact Name:			2nd Con	2nd Contact Name:								eria													rite the unsatisfactory routine lab#							
		0.151		4 . 5	4 . 5							Bacteria cteria							Sample					below.						Information Only			
1St F	Phone:	2nd Phone:			1st Phone: Sampled*				2nd Pho			_			1	cing	d Bac						*G	GWR = Source Groundwa					Ф				
#	# Sample Description/Locat	ation*	Sai	iipieu	Matrix DW,WW,		1X1	10	3X	(5	Quan	anti-tray			Reducing	elated	oy MF	Chlori	nated?	ppm	ppm	ution	Chlorinated?		ated?	ppm ppr		gativ	uctio	,			
" Jampie Description/Location		ation	Date	s	SW,STW, LT2	PA	Total	Fecal	Total	Fecal	Total	E-Coli	APC	HPC		Iron Related Bacteria	Fecal by	Yes	9	Total	Free	Distribution	GWR*	Yes	2	Total	Free	Investigative	Construction/ Repairs	Other			
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Notes	s / Comments																																
Relinquished by: (Signature and Printed Name) Company					Date Time					Received by: (Signature and Printed Na							ame)						Company										
Relinquished by: (Signature and Printed Name) Company				mpany						Date Time				ved by:	(Signa	iture an	d Printe	d Nan	ame) Company														
Received for Lab by: (Signature and Printed Name)			Date					tainer(s) Received: BSK Bottle = 120mL Plastic Serial w/ NA ₂ S ₂ O ₃																									
									(Other	·=																						
	-			D EX Courier: _	•									y:						Ch	eck	/	Ca	ash	/	(Card				-		
	•	ole Wrap Paper Blue None Chil			lition of Sample: Acceptable Other In: Y/N Custody Seal: Y/N Date:																		PIA#				lnit.						
Cooling Method: Wet Blue None Chilling Process Begun: Y/N Custody Seal: Y/N Date:																					•												