ZENITH Laboratories

Environmental Microbiology Laboratory – Controlled Environment Services - Chain of Custody Form

Client: _____   Contact Phone: _____

Contact: _____   Contact Email: _____

Project Description: _____   Project Number: _____

Address: _____   Purchase Order No: _____

| **Documentation Delivery:** |
| ☐ Client Contact Email |
| ☐ Alternate Email: |

City: _____ State: _____ Zip Code: _____

Analysis Code	Description & Sample Types	Available Turn-Around-Times (TAT)
201-B	Culturable Bacterial – CFU Count	Standard: 1-2 Week
201-F	Culturable Fungi – CFU Count	Standard: 1-2 Week
201-C	Single Plate Method Combined Microbial Count	Standard: 1-2 Week

Sample Types:	Air	Contact Plate	Swab	Gloved Fingertip	Media Fill	Media Control	Special

Air Sample Device Manufacturer: _____ Model: _____ <u>OR</u> Provide # of Impaction Pores: _____

Sample ID	Sample Location/Description	Sample Date/Time	ISO Class	Sample Volume	Sample Type	Requested Analysis Code	Organism IDs[1]
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐

[1]If microbial identifications are requested, please select the check box and laboratory will attempt to identify organisms to the genus level at a minimum. Identifications may add 1-2 weeks to Turn-Around-Time (TAT).

Laboratory Use Only	
Receipt Condition:	
Temperature:	
LIMS ID No.:	

Sampled By (Client): _____ **Date:** _____ **Time:** _____

Relinquished By (Client): _____ **Date:** _____ **Time:** _____

Received By (Laboratory): _____ **Date:** _____ **Time:** _____

Environmental Microbiology Laboratory – Controlled Environment Services - Chain of Custody Form

Sample ID	Sample Location/Description	Sample Date/Time	ISO Class	Sample Volume	Sample Type	Requested Analysis Code	Organism IDs[1]
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐
							☐

Laboratory Use Only	
Receipt Condition:	
Temperature:	
LIMS ID No.:	

Sampled By (Client): _____ **Date:** _____ **Time:** _____

Relinquished By (Client): _____ **Date:** _____ **Time:** _____

Received By (Laboratory): _____ **Date:** _____ **Time:** _____

Controlled Document - Version 4.0 (2024)