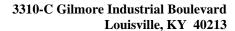




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Environmental Microbiology Laboratory – Water Samples Chain of Custody Form Contact Phone: Client: Contact Email: Contact: Project Number Project Description: Collection Address: Purchase Order No.: **Documentation Delivery:** State: Zip Code: ☐ Client Contact Email City: ☐ Alternate Email: **Analysis Code Available Turn-Around-Times (TAT) Description & Sample Types** EM 301A Total Hardness – Potable Water Standard: 2-3 Day Rush: 1 Day Same Day Heavy Metals Screen Panel – Potable Water EM 301B - G (Ref Appendix A) Standard: 2-3 Day Rush: 1 Day Same Day Total Coliforms & E. coli – Potable Water EM 302 Standard: 2-3 Day Rush: 1 Day Heterotrophic Plate Count, Total Aerobic – Potable Water EM 303 Standard: 2-3 Day Water Fungal Culturable Analysis – Counts Only – Potable Water EM 304AF Standard: 1 Week Water Fungal Culturable Analysis – Counts & ID (3 – IDs) – Potable Water Standard: 2 Week EM 304BF Water Bacterial Culturable Analysis – Counts Only – Potable Water **EM 304AB** Standard: 1 Week Standard: 2 Week EM 304BB Water Bacterial Culturable Analysis – Counts & ID (3 – IDs) – Potable Water Legionella Detection and Enumeration ISO 11731:2017 – Potable Water EM 305 Standard: 2 Week Requested Sample Sample Requested Sample Sample ID **Sample Location/Description** Analysis Date/Time Volume Type **TAT** (Code) **Laboratory Use Only** Date: Time: Sampled By (Client): **Receipt Condition:** Date: Time: **Relinquished By (Client): Temperature:** Received By (Laboratory): _____ Date: ____ Time: ____ LIMS ID No.:





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Environmental Microbiology Laboratory – Water Samples Chain of Custody Form

Sample ID	Sample Location/Description	Sample Date/Time	Sample Volume	Sample Type	Requested Analysis (Code)	Requested TAT

Laboratory Use Only		Sampled By (Client):	Date:	Time:	
Receipt Condition:		Relinquished By (Client):	Date:	Time:	
Temperature:		Received By (Laboratory):	Date:	Time:	
LIMS ID No.:				Page	of