

For Office Use Only:

CC: _____

CCT#: _____

AMT: _____

SPI: _____



WATER ANALYSIS REQUISITION

PART 1 - GENERAL INFORMATION (Fill in completely, PLEASE PRINT CLEARLY AND LEGIBLY)

Building Inspection Firm (if applicable): _____

Buyer/Client: Name _____ Tel _____

Email _____

Water Source: Street _____

Town _____ State _____ Zip _____

PART 2 - REQUESTED ANALYSIS

RAW SAMPLE

TREATED SAMPLE

1. BASIC PROFILE		
2. STANDARD (basic, arsenic, uranium, lead, radon in water – single)		
3. ARSENIC & URANIUM		
4. RADON IN WATER - SINGLE		
5. RADON IN WATER - DUAL		
6. BACTERIA - COLIFORM & E.COLI		
7. CHEMICAL-PHYSICAL ANALYSIS		
8. LEAD - 1ST DRAW <input type="checkbox"/> FLUSH <input type="checkbox"/>		
9. COPPER - 1ST DRAW <input type="checkbox"/> FLUSH <input type="checkbox"/>		
10. STANDARD & VOCs		
11. STANDARD & PESTICIDES- 505 SERIES		
12. STANDARD & HEAVY METALS		
13. COMBINED (standard, vocs, pesticides, heavy metals)		
14. OTHER		

PART 3 - SAMPLERS CERTIFICATION (Cannot accept samples without all sections completed.)

Reason for Test(s), check one: ☐ Certificate of Occupancy ☐ Property Sale ☐ Annual Test ☐ Other: _____

Water Treatment System: ☐ YES ☐ NO

City Water: ☐ YES ☐ NO

If system present specify type: softener, neutralizer, UV, filter, radon water system, etc. _____

Sampling location: ☐ Kitchen ☐ Bathroom ☐ Well Tank ☐ Other _____

****By signing and dating below, the sample collector affirms that he/she has provided accurate information and understands and has complied with all applicable directions provided by Aquatek Lab's sampling directions sheet that has been provided. ****

Sampled By: (Print Name)

Signature _____ Collection Date: _____ Time: _____

LAB USE ONLY

TIME RECEIVED:

TIME SETUP:

TEMPERATURE(°C):

TRC: PRESENT/ABSENT