CLEAN WATER LAB
www.cwlabtech.com

6343 S NC 9 HWY
Columbus, NC 28722

Ph: 828-393-4136
Lab Code: 37900

Please fill out order form completey. Review instructions carefully and select the appropriate code for each sample cup you submit.

❧ Billing Information

Client Name		**Phone Number(s)**
Company Name		
Street Address		
City	**State**	**Zip Code**
E-mail Address(es)		

❧ Collection Location (Well Water Samples)

Client Name	
Street Address	
City	
State	**Zip Code**

EACH SAMPLE CONTAINER IS CONSIDERED A SAMPLE.
PLEASE FILL OUT A LINE FOR EACH CONTAINER.

TESTING ANALYTES — **LAB USE ONLY**

Sample container	Sample ID (Kitchen, pump, etc.)	Potable (Y/N)	Sample Type (Well/Surface)	Time of Collection	am / pm	Date of Collection	Bacteria (P/A)	**Bacteria (MPN)	Hardness	Nitrates	Nitrites	*Iron	*Copper	*Lead	Sample ID Number	Rejected? Y/N	Temp. Preserve
Samp. 1																	
Samp. 2																	
Samp. 3																	
Samp. 4																	
Samp. 5																	
Samp. 6																	
Samp. 7																	

You must have the correct vials to order testing.   **Bacteria tests for Escherichia coli and total coliform bacteria. Counts are produced in Most Probable Number (MPN)

❧ Sample Collector Information

Sample Collector's Printed Name	Sample Collector's Signature	Date	Collector's Company Name	Phone Number

❧ Chain of Custody: Sample Submission

Date Submitted	Time Submitted	Client Printed Name	Client Signature	Receiving Signature
	am pm			

LAB USE ONLY

Date Received in Lab	Time Received	Lab Signature	Comments
	am pm		
Invoice #	Payment Method		