



# BACTERIAL WATER SAMPLE

HUMBOLDT COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES  
PUBLIC HEALTH BRANCH LABORATORY

LAB #

Mark J. Miller, Laboratory Director ELAP Certification # 2033  
529 I Street, Eureka, CA 95501 (707) 268-2179  
Hours: Monday through Friday, 08:30 am to 12 noon and 1 to 5 pm

NAME:		DATE SAMPLED:	TIME SAMPLED:
ADDRESS REPORT SENT:		SAMPLED BY:	BOTTLE NUMBER:
PHONE #	FAX #	# OF CONNECTIONS:	RESIDUAL CHLORINE:
LOCATION OF SAMPLE / ADDRESS:		RESULTS COPY TO:	
<b>SAMPLE TYPE:</b> <input type="checkbox"/> DRINKING WATER <input type="checkbox"/> WASTE WATER <input type="checkbox"/> SPRING/CREEK <input type="checkbox"/> OTHER _____		<b>TEST REQUESTED:</b> <input type="checkbox"/> PRESENCE / ABSENCE <input type="checkbox"/> COLILERT QT 51 <input type="checkbox"/> COLILERT QT 2000 <input type="checkbox"/> OTHER _____	

\*\*\*\*\* Lab Use Only \*\*\*\*\*

DATE & TIME RECEIVED:	<input type="checkbox"/> BILL <input type="checkbox"/> PAID RECEIPT # _____	SPECIMEN CONDITION:	COMMENTS:
<input type="checkbox"/> LAB NOTIFIED INITIALS:		<input type="checkbox"/> ON ICE <input type="checkbox"/> CLIENT BOTTLE <input type="checkbox"/> ROOM TEMP <input type="checkbox"/> OTHER _____	

\*\*\*\*\* NO WATER SAMPLES ACCEPTED ON FRIDAY \*\*\*\*\*

revised 6/3/2009



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