

REQUISITION FOR WATER SAMPLE UNIT

KENT COUNTY HEALTH DEPARTMENT REGIONAL LABORATORY

INSTRUCTIONS:

- Provide ALL information requested in the ORDER INFORMATION section.
- Please DO NOT order more than a 3-month supply of bottles at any one time. Orders may be modified based on prior usage.
- If you submit less than 12 samples per year, please obtain sample bottle(s) directly from your county environmental health office.
- Return this completed form to: **Kent County Health Department Regional Laboratory**

700 Fuller Avenue NE
Grand Rapids, MI. 49503

OR

PO Box 355
Grand Rapids, MI 49501
- **Note: Orders may also be faxed to (616) 632-6899, or emailed to KCEH_LabMail@kentcountymi.gov.**
- **Bottles will no longer be shipped free of charge.**

Please allow a minimum of 10 days for processing of your order.

How do you want to receive your bottles? Please mark appropriate box:

- Pickup at KCHD
- Ship to address below (all bottles shipped will be billed to account, at UPS current shipping rates)
 Please provide UPS "Bill To" Account number _____
- Please call to make other arrangements.
- Please send with Courier* (BEDHD and MMDHD only)

ORDER INFORMATION:

Name of Facility/Company			WSSN (Public supplies only) or Pool Serial Number:
Shipping Address (No PO Boxes – Please)			Date
City	State	Zip Code	Area Code & Phone Number
			Form Completed By:

DESCRIPTION	QUANTITY REQUESTED				
<u>BACTERIOLOGICAL ANALYSIS of drinking water, swimming pools, spas, and surface/recreational water.</u> <i>Sterile 100 mL polystyrene bottle with WHITE cap, (10% thiosulfate added)</i>	12, 24, 40, 80				
<u>AUTOMATED PARTIAL CHEMICAL ANALYSIS of drinking water.</u> <i>Plastic 100 mL bottle with BLACK cap, new or chemically cleaned.</i> **MUST BE RETURNED THERMALLY PRESERVED FOR TESTING**	12, 24, 40, 80				
<u>LEAD OR ARSENIC ANALYSIS.</u> <i>Amber colored 100 mL bottle with WHITE cap, new or chemically cleaned.</i>	Individual, list quantity needed				
<u>COPPER-LEAD FOR CORROSION CONTROL-</u> <i>Amber colored 1000mL bottle with White Cap, new or chemically cleaned.</i>	Individual, list quantity needed				
If you are mailing them back, would you like either Styrofoam packaging or mailers?	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Styrofoam</td> <td style="border: none;">Mailer</td> </tr> <tr> <td style="border: none;">YES / NO</td> <td style="border: none;">YES / NO</td> </tr> </table>	Styrofoam	Mailer	YES / NO	YES / NO
Styrofoam	Mailer				
YES / NO	YES / NO				
Request for Water Analysis Forms Only	12, 24, 40, 80				

LAB USE ONLY

DATE RECEIVED:	APPROVED BY:
ORDER FILLED BY:	DATE:

Revised 11/07/16-alc