



FOOD SAFETY TESTING SUBMISSION FORM

Animal Health Laboratory
 Hancock Veterinary Building – 65 Sipu Awti, Bible Hill, NS, B2N 2P3
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 www.novascotia.ca/agriculture-labs

Accession Number:

(LAB USE ONLY)

*Submitter Information

☐ Owner _____ Address _____ Email _____
 Producer/Plant Name _____ Phone No. _____

☐ Food Safety Inspector _____ ☐ Other (Name/Email) _____

Billing To: ☐ Owner ☐ Dept. of Environment ☐ Other

Report To: ☐ Owner ☒ Food Safety Program Officer ☐ Other _____

Minimum weight required for testing:

Ideal specimen temperature: 2 to 8°C

Salmonella 50g
 E.coli/Coliforms 25g
 Staphylococcus aureus 25g

*Specimen/Test Information

Date Submitted:		Date Sampled:			Lab Use Only	
Specimen Type	Product Code/ Production Date	Specimen Identification	Test(s) Requested	No. Sent	No. Recd	Temp on Arrival
			E.coli/Coliform <input type="checkbox"/>			
			S.aureus <input type="checkbox"/>			
			Salmonella <input type="checkbox"/>			
			E.coli/Coliform <input type="checkbox"/>			
			S.aureus <input type="checkbox"/>			
			Salmonella <input type="checkbox"/>			
			E.coli/Coliform <input type="checkbox"/>			
			S.aureus <input type="checkbox"/>			
			Salmonella <input type="checkbox"/>			
			E.coli/Coliform <input type="checkbox"/>			
			S.aureus <input type="checkbox"/>			
			Salmonella <input type="checkbox"/>			
			E.coli/Coliform <input type="checkbox"/>			
			S.aureus <input type="checkbox"/>			
			Salmonella <input type="checkbox"/>			

Date Received:	Received By:	Case Coordinator:
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Note1: The laboratory does not prepare composite or pooled specimens for testing. Each individual specimen or package submitted is tested and reported as an individual test result.

Note2: All food safety testing is conducted at an external ISO/IEC 17025-accredited laboratory. Results reflect the testing performed by this accredited third-party facility.