

WATER REQUISITION

***Required Information**

- Bacteria Water Samples **MUST** be received to Laboratory Services within 24 hours of sampling
- **Water samples MUST be submitted by 3pm Monday to Wednesday and by 1pm on Thursdays. Water samples are not accepted on Friday.**
- Bacteria Water Samples with color (brownish/yellowish, etc.) **MUST** be submitted before Wednesday at 3:00pm
- For additional information and full instructions on **HOW TO TAKE A BACTERIA WATER SAMPLE**, refer to the reverse side of this form

<p>Client Mailing Information – PLEASE PRINT CLEARLY</p> <p>*Type of report (check ONE only): Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/></p> <p>*Name/Company: _____</p> <p>_____</p> <p>*Address: _____</p> <p>_____</p> <p>*Town/City: _____ *Postal Code: _____</p> <p>*Telephone: _____ *Fax: _____</p> <p>*Email: _____</p> <p>*Confirm email: _____</p> <p>*Registered Drinking Water # (if applicable):</p> <p>_____</p> <p>*Client Signature: _____</p>	<p>COPY OF REPORT to <i>(if different from mailing information)</i></p> <p>*Type of report (check ONE only): Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/></p> <p>*Name/Company: _____</p> <p>*Address: _____</p> <p>*City/Town: _____ *Postal Code: _____</p> <p>*Telephone: _____ *Fax: _____</p> <p>*Email: _____</p> <p>*Confirm email: _____</p> <hr/> <p>Sample Information – PLEASE PRINT CLEARLY</p> <p>Drilled Well <input type="checkbox"/> Dug Well <input type="checkbox"/> Milk Water House <input type="checkbox"/></p> <p>*Date Sample Taken: _____ *Time Taken: _____</p> <p>*Sample location (pond, tap, etc): _____</p> <p>*Address of Water Source: _____</p> <p>_____</p>
<p>Select Test(s) Requested</p> <p style="text-align: center; color: blue;">REFER TO ANALYTICAL FEE SCHEDULE FOR PRICING AND FULL LIST OF AVAILABLE TESTING</p> <p>Bacterial Analysis: (requires sterile, approved container obtained from Lab Services)</p> <p><input type="checkbox"/> P/A (Present/Absent – coliform/E. coli)</p> <p><input type="checkbox"/> MPN (Estimated count of bacteria – coliform/E. coli)</p> <p>Mineral Analysis: (requires 250mL bottle obtained from Lab Services)</p> <p><input type="checkbox"/> Standard W1 Water Package <i>(Ca, Mg, K, Na, Cl, SO₄, Fe, Mn, Cu, Zn, Ba, B, Cd, Cr, Al, pH, NO₃+NO₂-N, Alkalinity, Conductivity and Hardness)</i></p> <p><input type="checkbox"/> Mineral Testing <i>(Ca, Mg, K, Na, SO₄, Fe, Mn, Cu, Zn, Ba, B, Cd, Cr, Al and Hardness)</i></p> <p>Additional Analysis:</p> <p><input type="checkbox"/> Uranium **</p> <p><input type="checkbox"/> Lead **</p> <p><input type="checkbox"/> Arsenic **</p> <p><input type="checkbox"/> Other (please specify): _____</p> <p>_____</p> <p><i>**one additional 250mL sample bottle is required for lead, arsenic and/or uranium analysis.</i></p>	<p style="background-color: yellow;">OFFICE USE ONLY:</p> <p>Received at Regional Office (if applicable): _____</p> <p>Order ID:</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin: 5px 0;"></div> <p>Temperature (°C): _____ Initials (Receiver): _____</p> <p>Date Stamp (received at Lab): _____</p> <p>Security String Used: Yes <input type="checkbox"/> No <input type="checkbox"/> Attempt <input type="checkbox"/></p> <p>Client Called: <input type="checkbox"/> NSE Called: <input type="checkbox"/></p> <p>Date: _____ Time: _____ Initials: _____</p> <p>Comments:</p> <p>_____</p> <p>_____</p>

Nova Scotia Environment recommends bacterial testing of water quality at least every six months and chemical testing of water quality at least every two years.

Please note: Samples are analyzed as provided. The laboratory takes no responsibility for the accuracy of the information provided by the person submitting the sample (e.g. location, date and time taken, etc.). Lab Services reserves the right to refuse samples collected in unissued bottles, samples with an odor of chlorine, or samples containing foreign material. Laboratory Services is a testing facility only. It is up to individual clients to determine what testing they require.

Report of results will ONLY be provided in the format selected (email, fax or mail).

Bacteria samples submitted after 3pm will not be entered into the system until the next business day.

INSTRUCTIONS ON HOW TO TAKE A BACTERIA WATER SAMPLE

1. Remove the screen from the faucet. Clean the inside and outside of the tap opening with rubbing alcohol.
2. Run cold water for 3 to 5 minutes.
3. Before taking the sample, reduce the flow rate to approximately the width of a pencil before taking the sample. The flow rate should be low enough to ensure that no splashing occurs as the container is filled.

FLIP TOP VIAL:

1. Open sterile container by pushing up cap tabs. NOTE: DO NOT remove pill from the container! (The color of the pill can range from white to dark grey or purple, and it may be speckled in appearance. This is normal.)
2. Fill the container ABOVE the EPA 100mL fill line. Samples containing *less* than 100mL WILL BE REJECTED.
3. Close the container by pressing the cap from the hinge location and pushing it forward. It should securely snap shut.
4. Close the tab, then pull the string through the round hole on the post. This will lock the vial.
4. Read all submission requirements on the front of this water sample submission sheet, above the signature line.
5. Ensure that all relevant sections on the front of this water sample submission sheet are completed. Submit this form along with your water sample.

SCREW TOP VIAL:

1. While holding the sample container at the base, remove the seal around the cap before attempting to open the bottle.
2. Remove the cap with the free hand. Be careful NOT TO TOUCH the inside of the bottle cap or bottle lip. Continue to hold the cap in one hand with the inside facing down while the bottle is being filled. Do not touch the inside of the cap or lay it down.
3. NOTE: Sample bottle contains a powder preservative. DO NOT rinse the bottle.
4. Fill the bottle ABOVE the 100mL fill line. DO NOT allow the bottle to overflow.
5. Carefully replace the cap and entire it is screwed on securely.
6. Read all submission requirements on the front of this water sample submission sheet, above the signature line.
7. Ensure that all relevant sections on the front of this water sample submission sheet are completed. Submit this form along with your water sample

All bacteria samples must be transported to the laboratory within 24 hours of sampling. It is recommended that samples be kept at less than 10°C until delivered to the laboratory.