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Lab Use Only

Bottle ID: AK

Date Received: _____

Time Received: _____

Received by: _____

Temp: _____

Delivered by: _____

Microbiological Analysis Chain of Custody

___ Std ___ 1 BD ___ 2BD (Rush at additional cost) SDG: _____

SECTION 1 – TO BE FILLED OUT BY CLIENT

Items in **BOLD** MUST be filled out by the sampler. Missing information may result in lab rejection of the sample.

Client: _____ Reporting Contact: _____

Address: _____ City, State, Zip: _____

Phone: _____ Project ID: _____ Email: _____

Date Sampled: _____ Time Sampled: _____ PWS ID#: _____

Location Sampled: _____ State Sampling Pt. ID: _____ Facility ID: _____

Sampler Name Printed: _____ Sign/Date Here: _____

Drinking Water: Treated Total Chlorine: _____ mg/L Ultraviolet Filtered Routine Dist.
 Untreated Repeat Raw or Process Water Special

Non-Drinking Water: Salt Water Waste Water Raw Source Water Pool and Spa

- Analysis Requested:**
- Standard Drinking Water: Total Coliform Bacteria/E. coli – Presence/Absence Results**
 - Drinking Water: Total Coliform Bacteria – Quanti-tray MPN**
 - Drinking Water: Total Coliform Bacteria – Membrane Filtration** Enumeration Results
 - Wastewater: Fecal Coliform Bacteria – Membrane Filtration.....Hold Time: EPA 8 hours**
 - Wastewater: Enterococcus Bacteria – Quanti-tray MPN.....Hold Time: EPA 8 hours**
 - Marine: Fecal Coliform Bacteria – Membrane FiltrationHold Time: EPA 8 hours**
 - Marine: Enterococcus Bacteria – Quanti-tray MPN..... Hold Time: EPA 8 hours**
 - Above samples accepted Monday through Thursday until 4:00 pm
 - Pool and Spa: Heterotrophic Plate Count – SimPlate and Total Coliform – Quanti-tray MPN**
Above samples accepted Monday through Wednesday until 4:00 pm
 - Other:** Specify Analysis: _____

Samples received on Thursday for Pool/Spa, and Friday for Total Coliforms require weekend analysis with an additional \$150 fee. Contact your lab for details and weekend analysis costs.

SAMPLING INSTRUCTIONS

Step One



1: Do not rinse the bottle. The powder in the bottle is meant to be there and will not contaminate your sample.

Step Two



2: Remove all hoses, aerators or screens from the faucet. Avoid filling from swivel faucets or kitchen sinks. After removing screens, disinfect the faucet by dipping the spout in a cap of bleach for 30 seconds.

Step Three



3: Run water for at least 3-5 minutes to ensure that water has not been sitting in the pipes or tanks for a long time. WASH YOUR HANDS WITH SOAP AND WARM WATER!

Step Four



4: Open sample bottle carefully. Remove the red plastic sterile strip from the bottle and fill the bottle to at least the fill line (120mL). Do not fill up to the top, allow 1” of head space.

Step Five



5: Screw cap on tight. Take care not to touch the inside of the cap or bottle. If this happens, start with a new bottle.

Step Six



6: Fill out paperwork completely, include the time and date sampled Drop off or send the sample to the lab in secure packaging so the bottle does not break.

IMPORTANT: The lab must receive the sample when the lab is open for business and within 30 hours of collection.

Sampling protocol adapted from and photos from: ADEC Drinking Water Publication “Taking a Total Coliform Bacteria Sample Properly” at: <http://www.dec.state.ak.us/eh/dw/publications/publications.html>