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| Chain of Custody- Laboratory Samples - Water | | | | | | | | | IGMM Lab Reference#: | | | | |
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| Contact Name (for Reporting): | | | | | | Email: | | | | | | | |
| | c Prefe | | | | Method: Email Fax Regular Mail e or Non-Potable Under Sample M | Fax: Paperless Invoice latrix!!!!! | e <i>Copies to:</i> | | | | | | |
| Note: HOLD Time is 30 hrs for Potable (Drinki time from sampling to start of Analysis. Staminimum 250 ml/sample. Send 100 ml for ear Pseudomonas or Enteroccocci. | | | | | | ndard Drinking Water Package needs the additional test (ie) Yeast / Mold | | | rested Below- Specific Method; otherwise, will chose a standard method. Applicable sample rows below test type. | | | | |
| Sample #: | No. of Bottles | Potable Water | Non-Potable | Other (describe) | Sample Description/ Location | Date/Time Collected: | | Standard Drinking Water Package (HPC-Pour plate, and TC,FC, E. coli by Membrane Filtration) | Total Coliform TC | Fecal Coliform | E. coli | НРС | Other: |
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| Reline Date | ā. | | y: | | Ws | Received by: I.G. MicroMed Environmental Inc. Date/Time: CC10.02 Version 2.3 Issued 19June2015 | | | | | | | |