



# Meritech, Inc.

Laboratory Certification No. NC27740

642 Tamco Rd, Reidsville NC 27320

Phone: 336-342-4748 Fax: 336-342-1522

Email: info@meritech-labs.com

## **NON-REGULATORY (Residential) BACTERIOLOGICAL ANALYSIS**

\*\*\*PLEASE READ INSTRUCTIONS ON BACK OF FORM \*\*\*

Laboratory ID #: **37740**

Meritech Work Order #: \_\_\_\_\_

### CLIENT INFORMATION

Client: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Would you like us to Fax or Email you the results?

Fax  Email

### BILLING INFORMATION

Bill To: \_\_\_\_\_ P.O. #: \_\_\_\_\_

Address: \_\_\_\_\_ Project: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Paid Upon Receipt:

Check  Cash

### SAMPLE INFORMATION

Sample Location: \_\_\_\_\_

Sample Collection Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sample Collection Time: \_\_\_\_:\_\_\_\_:\_\_\_\_ m  
(Month / Day / Year) (HH:MM) (am or pm)

Collected By (Signature): \_\_\_\_\_

Are you on a City Water System?  Yes  No

If so, list the name of the City Water System: \_\_\_\_\_

### FOR LABORATORY USE ONLY

Analysis Requested By Client:  Bacteriological  Septic  Nitrate  Nitrite  Lead  
(Check ALL that apply)  Other (Please List): \_\_\_\_\_

Analysis Subcontracted? :  Yes  No Purchase Order#: \_\_\_\_\_

Sample Collection Method:  Delivered to Lab  On-Site Sample

RUSH Sample?  Yes  No Date Client Requests Results: \_\_\_\_\_

### LABORATORY ANALYSIS INFORMATION

Sample Method Used: **312 / 316**

Date Analysis Begun: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_:\_\_\_\_ am/ pm (circle one)

Date Analysis Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_:\_\_\_\_ am/ pm (circle one)

Total Coliform Bacteria Present?  Yes  No E. Coli Present?  Yes  No

Analysis Certified By: \_\_\_\_\_

(Laboratory Representative)