

Fresno

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MICROBIOLOGY CHAIN OF CUSTODY

*Required Fields						Temp:			Th	Thermometer ID:																	
Company/Client	t Name*:		Report Attention*:			•	Invoic	e To*:						Phone*	:				Fax*:								
			Additional cc's:				PO#:							E-mail*	<u>:</u>												
Address*:		City*:	State*:		Zip*:					_	Options WAMP		EDD	Type:					Water	Trax ID)#:						
Project #:							Copies to: Fresno Co. Merced Co. Sac Co.							SWRCB □ Tulare Co. □ Other:													
Sampler Name ((Printed / Signature)*:								Regu	ılatoı	ry Sample	o*:		Yes		No	TAT*			Stand	ard - 1	0 Busin	ness Da	ays			
fee. All samples	submitted for compliance	ve verbal results available e with the total coliform rul												s can be	made for an	additional					(Surcha Needed						
IF SAMPLE IS COLIFORM POSITIVE CONTACT* Name: 1st Phone: 2nd Phone:						□ Total □ Fecal □ E-Coli				Ē - - -	Class A Class B Class B	☐ 48 Hour (PP) ☐ 72 Hour (PP) SimPlate	(1 X 10)	>	Field Notes		Source					Туре					
#		ple Description*		Sam Date	npled*	PA	1X1	10	3X5		Fecal Solids	HPC	Colilert	Quantitray	Cl2 Res	Turbidity	DW	MM	Solid	Surface Wtr	Ag Water	Routine	Repeat	Replacement	Other		
				Date	Time		IXI		37.0		Collus	111 0							0)	0)				ш.			
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Notes / Commen	its																										
Relinquished by: (Signature and Printed Name) Company					Date	Time Re		Recei	ved by: (Signature and Printed Name)						Company	mpany											
Relinquished by: (Signature and Printed Name) Company					Date	Time Receive			ived by: (\$	ed by: (Signature and Printed Name) Company																	
Received for Lab by: (Signature and Printed Name)						Time		Conta	ontainer(s) Received: BSK Bottle = 120mL Plastic Serial w/ NA ₂ S ₂ O ₃ Other =																		
Shipping Method: GLS UPS Fed Ex WALK-IN PMS Packing Material: Bubble Wrap Paper Other Condition of Sample: Cooling Method: Wet Blue None Chilling Process Begun: Y/N						· ·						nt Received at Delivery: Check /							Cash / Card								