

*Request form example*

**SAMPLE SITE**

PWS ID: **CO0**       -

System Name: Jones family Cabin

Address: 1234 Mountain View Drive

Foothills Hill CO 12345  
City County State Zip

Description: Bathtub Well  
Location Source

**SPECIMEN INFORMATION**

Collected:   -   -   Time   :    a.m.  p.m.

month day year hour min

Collected by: Jones Water Type: Well

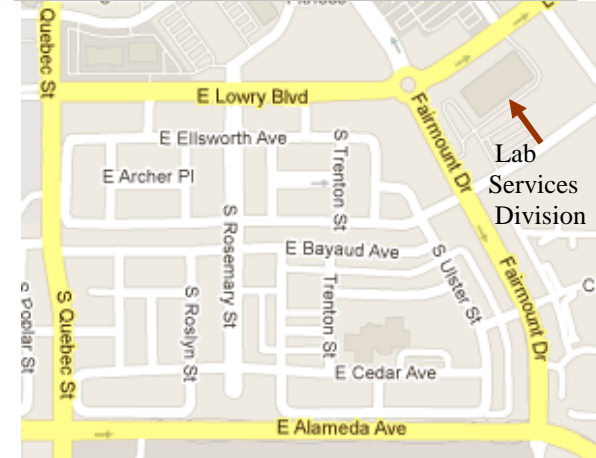
Purpose:  Routine  Special Purpose  Repeat  
 Compliance  Personal Information

Chlorine residual:    mg/L Water Temperature   F

Fluoride    mg/L

Temperature at Receipt: **LAB USE ONLY**

Comments: Please email results:  
JonesFamily@madeup.com



I:\Customer info\Instructions\Chemistry\INST-Deluxe-R0.doc

# Laboratory Services Division

## Water sampling instructions for the Deluxe Colorado Package



Colorado Department of Public Health and Environment

8100 Lowry Boulevard  
Denver, CO 80230

Phone (303) 692-3048  
Fax (303) 344-9989

<http://coloradostatelab.us>

## *Deluxe Colorado Package*

### *Bottles included in package:*



- 1- 250 mL Nutrient bottle
- 1- 1 liter Neutral bottle
- 1-250 mL metal bottle
- 1 BacT bottle (clear plastic with white lid)

### *Sample Collection*

- Run cold water tap for 3-5 minutes to flush pipes
  - ~ Collect sample from non-swivel, non-aerated tap
  - ~ Bathtub faucet works well
- Fill BacT bottle to the 100 mL fill line
- Fill the other bottles to the base of the neck

### *Bottle labels*

- Write the customer name and collection date and time on each label and affix one label to each bottle
- If submitting bottles for more than one sample site/location please describe the location so we can tell the samples apart

### *Request for Analytical Services Form*

- Check to make sure the customer address is correct and that the address can accept mail. Record an email address if you want the results emailed
- Ignore the PWS ID as this is only for public water systems
- Record any relevant sample site information. See back page for example
- Record the date and time that the sample was collected
- Record the water type. For example: well, public, surface/pond/stream, or other (include description)
- Record the temperature of the water if known

### *Submitting samples to the laboratory*

- Bottles must be returned within 30 hours of sampling or the bacteria results may not be valid
- Either hand deliver or overnight the samples to:

Laboratory Services Division  
8100 Lowry Boulevard  
Denver, Colorado 80230