

**SAMPLING & SHIPPING or DELIVERY INSTRUCTIONS
LEAD / NITRATE / NITRITE**

↙ Please Circle which test(s) you need:

LEAD ONLY or LEAD/NITRATE/NITRITE (All 3 will be assumed if nothing is circled)

SAMPLE TAKING—PLEASE READ ALL INSTRUCTIONS BEFORE TAKING SAMPLE:

- **EPA sampling protocol** for LEAD states that water must stand motionless in house lines--For at least 6 hours before sampling--then taken from COLD water tap--open bottle and fill with first water that comes out of faucet.
- **NOTE: If house has been vacant**--run water to flush the lines the day before; then let water sit in lines 6 hours before sampling as above.
- **HIGH CHLORINE samples CANNOT be tested**--so make sure water has been run off, before sampling--If well has been chlorinated.
- **Deliver or ship sample** to Lab immediately upon collection, along with completed paperwork.
 - **IF YOU ARE SHIPPING**--follow these instructions:
 - Sample must be shipped Overnight Delivery to our Lab--due to holding times.
 - If you are also sending a Bacteria Sample with the Lead sample--
 - You can place BOTH samples in the SAME Express Mail bag and as a courtesy, we will cover the Express Mail cost. (make sure to place bottles inside their respective boxes before placing inside Express Mail envelope)
 - If you don't have a Bacteria sample to ship with the Lead sample, you are responsible for postage.
 - Please put CHECK MARK in front of desired turnaround time below--

**** NOTE: Standard (5 working days) will be assumed if none is marked.)**

TURNAROUND TIME	COST-LEAD ONLY	COST-LEAD/NITRATE/NITRITE
Check One:		
_____ Standard—5 working days	\$40.....	\$95
_____ 3-Day Rush	\$60.....	\$142.50
_____ NEXT DAY Rush.... (Results by CLOSE OF NEXT BUSINESS DAY)	\$80.....	\$190
(Sample must be received <u>BEFORE NOON</u> & Lab <u>MUST BE CALLED</u> first, to schedule)		

PAYMENT INFORMATION: Unless you are a billed customer, please include payment with sample—
Or call with credit card information—804-742-5577. Please refer to costs listed above—thank you!

PLEASE COMPLETE INFORMATION BELOW FOR CERTIFICATE OF ANALYSIS:

Water Owner: _____ Physical Address of Water: Street # _____

City/State: _____ Zip: _____ Date/Time Collected: _____

Note: If Public System Please Include PWSID#: _____

Sampler's Printed Name: _____ Sampler's Signature: _____

Company (if applicable): _____ Phone #: _____

Fax **OR** Email Report to: _____ (PAPER COPIES ARE NO LONGER MAILED)

*******LAB USE ONLY*******

DATE/TIME REC'D IN LAB:
_____ BY: _____

PAID BY: Check #: _____ C/C: _____

LAB PROJECT #:

OTHER: _____ AMT. PD: _____

DUE DATE:
_____ RUSH? _____

DATE PD: _____ REC'D BY: _____