

Please fill in the following information & return this sheet with the water sample. Sampling instructions are on the back of this sheet. **Note: All samples must be paid for when dropped off for analysis. Call for pricing.**

Sampling Location Info:

Name: _____ Phone #: _____

Street: _____ City/State: _____ Zip: _____

Results emailed to: _____

Who filled the bottles: _____

Date Sampled: ____/____/____ Time Sampled: ____:____ am or pm

Sample Source: () Well Water () City Water () Other _____

Sample Locations:	Types:	
() Kitchen Tap	() Raw	() Treated: _____
() Outside Tap/Hydrant	() Raw	() Treated: _____
() Other _____	() Raw	() Treated: _____

Please read the directions on the back of this sheet before collecting your water sample!

Analysis Requested:	Bottles Needed
Packages:	
() Ultimate Kit: Premium Kit & Softener Suite Kit	1-Sterile, 1-100mL, 3-250mL
() *Premium Kit: Coliform Bacteria, E. coli, Nitrates, Manganese, Lead & Arsenic	1-Sterile, 1-100mL, 2-250mL
() Safe Kit: Coliform Bacteria, E. coli, Nitrates, & Arsenic	1-Sterile, 1-100mL, 1-250mL
() Basic Kit: Coliform Bacteria, E. coli, & Nitrates	1-Sterile, 1-100mL
() Softener Suite Kit: Hardness, Iron, Tannins, pH, & Total Dissolved Solids	1-250mL
() New Well Kit: Coliform Bacteria, E. coli, Nitrates, & Arsenic Unique Well #:	1-Sterile, 2-100mL
Individually:	
() Coliform Bacteria	1-Sterile
() E. coli	
() Nitrates	1-100mL
() Nitrites	
() Nitrate + Nitrite (NO3+NO2)	
() Arsenic, Total	1-250mL
() Arsenic 3	
() Arsenic 5	
() Lead	1-250mL
() Manganese	1-250mL
() Fluoride	1-100mL
() pH	1-250mL
() Iron	
() Hardness	
() Tannins	
() TDS	
() Iron Bacteria	1-Sterile
() Sulfate Bacteria	
Mailing results is available for a fee	Kit Mailing Fee
Mailing Address:	Results Mailing Fee

*The MN Department of Health recommends testing your well for coliform, E. coli, nitrates, arsenic, lead & manganese to ensure it is safe to drink.

Water samples must be received within 24 hours, in our containers, & kept on ice. Failure to meet these requirements

WILL result in a comment on the final report. Chlorinated samples will be rejected.

**By submitting your samples, you agree to use of the test methods listed on our current Scope of Certification, found on our website, for the analysis of the analytes requested. **

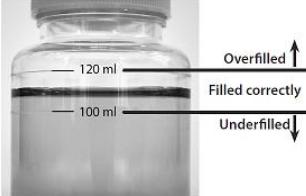
Rev #: 01-14-26 SA	Page ____ of ____	Office Use Only	MN Lab #027-035-135 EPA Lab Code MN00098
Code # _____	Date & Time Received _____ / _____	Temp on Arrival _____ C	On Ice: Yes or No
Pre-Paid By _____	Amount PD _____	Ck# _____	Client Name for Login: _____
Over Temp _____	Other: _____		
Past Holding Time _____ Not Received in AWLab Container GET CLIENT INITIALS _____		Batch # _____	
Received via: <input type="checkbox"/> Walk-in <input type="checkbox"/> AW Courier <input type="checkbox"/> Spee-Dee <input type="checkbox"/> Mail <input type="checkbox"/> UPS <input type="checkbox"/> Fedex <input type="checkbox"/> Other: _____ <input type="checkbox"/> Some samples in this batch are subcontracted, Lab: _____			

Sampling Instructions

Step 1: Fill out bottle labels, (some labels are waterproof, you may need to use a permanent marker). Fill the bottles according to the testing you requested, see table below for instructions. If you feel you are missing a bottle, please call.

Scan QR Code 
to view sampling
instructional videos!



Test	Bottle (See upper right-hand corner of bottle label)	Where to Sample	Sampling	Transport	Get back to lab within
Lead	250-mL	Primary Drinking Tap	Allow water to remain in pipes for at least 8, but no more than 24 hours before collecting sample. It is important not to run any water during this time frame. After 8 hours, fill bottle to shoulder with cold water. Be sure to fill the bottle provided with the water that has been sitting stagnant in the tap.	No Ice Needed	14 days
Coliform/ E. coli	Sterile 	Primary Drinking Tap	Remove the aerator from the end of the faucet; make sure all the rubber seals are also removed. Pour isopropyl alcohol onto a paper towel & clean the inside of the faucet. Allow the water to run 3-5 minutes on cold. Fill the bottle by removing the seal, do not rinse out powder or droplets that you may see in bottle. Do not touch the inside of the bottle or cap. If you put the cap down, please make sure to place it with threads up. Fill the bottle over the 100-mL line but below the 120 mL line, see picture. Immediately cap the bottle when done.	No Ice Needed	24 Hours
Nitrates and/or Nitrates	100-mL	Primary Drinking Tap	Run your cold water for 3-5 minutes. Fill bottle to shoulder.	Must be Received on Ice	24 Hours
Arsenic and/or Manganese	250-mL	Primary Drinking Tap	Run your cold water for 3-5 minutes. Fill bottle to shoulder.	No Ice Needed	14 days
Softener Suite	250-mL	See next column.	If you want to check if your softener is working, take sample after softener. If you want to determine what to set the softener at, take the sample before the softener. If you don't have a softener, take from any tap. Turn cold water on & run for 3-5 minutes. Fill one bottle to the shoulder per location.	No Ice Needed	14 days

Step 2: Prepare the samples for transit. Remember, if you are testing for nitrates, nitrites, or nitrate+nitrate, the samples need to be received on ice. Put the bottle in a cooler or bag with some cubed ice or some ice packs. If you are not bringing the sample back on the same day you filled the bottle, be sure to use cubed ice & surround the sample bottle with the ice. Receiving temperature needs to be less than or equal to 6°C (42°F) and not frozen. The other testing bottles can be received on ice as well, but it is not required.

Step 3: Bring the samples to lab within the time frame listed in the table above. You do not need to make an appointment. Our sample receiving hours are on the top of the other side of this paper. We take credit cards, cash, or check. **Curbside service is available**, just call 218-829-7974 when you are in our parking lot.

If you have any questions, please feel free to call us at
218-829-7974 anytime. Thank you for your business!