Reset Form

Fillable form for printing purposes only
Does not reset Billing and Report To information

DEQ DEPARTMENT OF ENVIRONMENTAL QUALITY

REQUEST FOR WATER ANALYSIS

Hours of Operation: Monday - Friday 8:00 am - 5:00 pm.
Closed on Saturday and Sunday

Instructions for sample collection are on the back of this form

Pre-payment or DWL Account number is required for testing

ACCOUNT/BILLING INFORMATION (Please Print)

WE DO NOT ACCEPT CASH!	checks payable to **State of Michigan** **Check #** **Amt. Encl.**
Account Name	DWL Account Number
Account Mailing Address	
City	State / ZIP Code

Visit our Website at **www.michigan.gov/deqlab** for more information

WSSN (Type I-II Public Water) or Pool Serial Number	Does sample contain chlorine?	**For questions call us at: (517) 335-8184**

SAMPLE SOURCE -
Use drop down menu to enter your option

0 - Single Family Dwelling
1 - TYPE I (community, apartment, subdivision, park, etc., with 25 or more residents year round) mobile home
2 - TYPE II (school, industry, restaurant, office, etc., serving 25 or more persons - 60 days or more per year)
3 - TYPE III (all other public supplies, duplex, small office, etc.)
7 - Surface Water (includes bathing beach and wastewater discharge
8 - Swimming pool or Spa
9 - Other

SAMPLING PURPOSE -
Use drop down menu to enter your option

0 - Routine Monitoring
1 - Real Estate Transaction
2 - Repeat Sample
3 - Repair/Construction/New Well
5 - Water Quality Problem
9 - Other

SAMPLE POINT -
Use drop down menu to enter your option

1 - Public System Well
2 - Public System Surface Water
3 - Untreated Public Distribution System
4 - Treated Public Distribution System
5 - Untreated Private Well
6 - Treated/Softened PrivateWell
7 - Pressure Tank/Plant Tap
9 - Other

SEND REPORT TO: (Please Print)

NOTE: RESULTS ARE AUTOMATICALLY EMAILED TO YOUR LOCAL COUNTY HEALTH DEPARTMENT

Name	E-mail address	
Mailing Address	Area Code & Phone number	
City	State	ZIP Code

SAMPLE COLLECTION INFORMATION *PLEASE PRINT*

****DATE AND TIME COLLECTED MUST BE FILLED OUT****

Sample Collector Name	Date Collected	Time Collected

☐ Do **NOT** analyze my sample(s) if received past the EPA specified hold time. (Hold times are indicated on the sample bottle.)
If this box is NOT checked, the sample will be analyzed.

Collector Code ***Enter Option***
0 - County Personnel 1- Water Supply Operator 2- DEQ DW staff
3- Private Citizen 4 - DEQ Staff other than DW 6- MDA Staff 9- Other

System/Owner Name

Collection Site (Street Address)		Township (If known)	Section (If known)
City	County	ZIP Code	Well Number (If more than one)
Sampling Point **- Only 1 location per form** (kitchen, bath, etc.)		Site Code or Permit Number (If known)	

TESTING REQUEST INFORMATION (REQUIRED TO RUN TEST)

Each sample point/site (Collection Site, Sampling Point, and Date/Time) must be the same for all samples on this form

TEST CODE	REQUIRED UNIT #	DRINKING WATER or POOL/SPA TEST	TEST FEE	CHECK TEST
B	30	Coliforms/E. coli (Bacteriology) **30 hour hold time**	**$16.00**	
R	32	Automated Partial Chemistry **48 hour hold time**	**$18.00**	
CAS	36ME	Arsenic	**$18.00**	
CCUB	36CC	Lead/Copper for corrosion control (First draw sample, instructions on back)	**$26.00**	
CPB	36ME	Lead	**$18.00**	
CXVO	36VO	Volatile Organic Compounds	**$100.00**	
CXTM/HA	36VO/36HA	Disinfection Byproducts Rule (TTHM & Haloacetic Acids)	**$175.00**	
SOC (3 bottles)	36PT/LP/HB	CXPT - Pesticides CXHB - Herbicides CXLP - Carbamates	**$365.00**	
TEST CODE	**REQUIRED UNIT #**	**SURFACE or WASTEWATER TEST (Pond, Lake, Ditch, etc.)**	**TEST FEE**	
NPEC-LO	30	E. coli (Counts 10 - 10,000) *delivery to lab - 6 hours*	**$15.00**	
NPEC-HI	30	E. coli (Counts 10 - 1,000,000) *delivery to lab - 6 hours*	**$25.00**	
NPFC-LO	30	Fecal Coliform (Counts 10 - 10,000) *delivery to lab - 6 hours*	**$15.00**	
NPFC-HI	30	Fecal Coliform (Counts 10 - 1,000,000) *delivery to lab - 6 hours*	**$25.00**	

TEST REQUEST INSTRUCTIONS:

- Place a check next to Test Code(s) of desired analysis.
- Check the UNIT# **on bottle** to ensure you have the REQUIRED UNIT for desired analysis.
- For other types of testing not listed, enter the TEST CODE, UNIT# (located on the sample bottle) and FEE in the area on the right side of this section.
- Refer to the full Testing Fee Schedule available from county health departments and DEQ Drinking Water Laboratory Website for other types of testing.

UNIT #	TEST CODE	ENTER FEE AMOUNT
TOTAL OF ALL FEES ⏩		

Fee amounts are subject change.

EQP 2300 (Front) (08/2016)

Submit Copy With Sample
Print or Save Copy For Your Records

Print Form

Please allow 3-10 business days for results, depending on the complexity of the testing ordered

Hours of Operation: Monday - Friday 8:00 am - 5:00 pm. Closed on Saturday and Sunday
Mail samples Monday - Thursday to receive at the Lab by Friday. No samples are processed on the weekend.

- A form is required for **each sample site** (Collection Site, Sampling Point, and Date/Time must be the same for all samples with this form).
- **Complete all parts of this form which apply, especially collection date and time.** Samples not properly identified or not having clear test requests MAY NOT be tested.
- Fill in your email address if you would like a copy of the report emailed when completed.
- **For additional information contact your local county health department, the Drinking Water Laboratory at (517) 335-8184 or visit our web site at www.michigan.gov/deqlab**

SAMPLE COLLECTION INSTRUCTIONS

UNIT#	INSTRUCTIONS
30	1. **This testing unit contains preservatives (tablet) in the sample bottle.** Do not rinse the bottle with sample. Do not open the bottle until ready to collect the sample. Do not touch the inside of cap or bottle. 2. If not collecting sample from a tap (lake, pool, etc.), plunge bottle mouth down, move in continuous arc down and back up from water, discard top half-inch or to 100 ml line. 3. If using a sample tap, select a **clean** (disinfect as necessary) faucet and remove such attachments as aerators, dishwasher connectors, etc. Allow water to run for about ten minutes at full flow from the sampling tap. Reduce flow to avoid splashing, and collect the sample directly into the bottle. Do not use an intermediate container. Do not allow water from the outside surface of the faucet to drip into the bottle. **Fill bottle only to the bottom of neck, or to 100 ml line.** 4. Most bacteriological testing has a **30 hour EPA hold time**. Samples must be received at the laboratory before the hold time expires. Surface water samples must be received at the laboratory within **6 hours** of sampling, and **before 3PM Monday thru Thursday**.
32*, 33* **36AC*** **36CN*** **36HA*** **36HB*** **36LP*** **36ME** **36PT***	1. **Sample bottle may contain preservative** (refer to unit label on bottle)**.** Do not rinse bottle with sample. Do not open the bottle until ready to collect the sample. Do not touch the inside of cap or bottle. 2. Select a clean faucet and remove such attachments as aerators, dishwasher connectors, etc. Allow water to run for about ten minutes at full flow from the sampling tap. Reduce flow to avoid splashing, and collect the sample directly into the bottle. Do not use an intermediate container. Do not allow water from the outside surface of the faucet to drip into the bottle. **Fill bottle to the bottom of neck.**
36TO* **36VO*** **36VO-NP*** **36VO-MEE***	1. **The sample vials contain preservative. Tap each vial in upright position to drain preservatives from cap. Do not rinse vial before collection.** 2. Do not open the vial until ready to collect the sample. Do not touch the inside of cap or vial. Select a clean faucet without attachments or leaking stem. Allow water to run for ten minutes at full flow. 3. Reduce flow and collect the sample directly into all vials provided. a. **For 36TO,** fill vial until water rounds at the top of vial. b. **For 36VO,** fill vial HALFWAY. Add 4 drops of the provided acid from small dropper bottle. Completely fill vial until water rounds at the top of vial. 4. **Cap and invert to check for air in vial.** THE SEPTA (RUBBER PART INSIDE CAP RING) MUST BE SMOOTH SIDE DOWN IN CONTACT WITH SAMPLE TO AVOID POSSIBLE CONTAMINATION. 5. **Samples containing an air bubble may not be analyzed**. If air is observed in inverted sample, remove cap, add water (**DON'T DUMP SAMPLE)** and recap as instructed.
36CNa*	1. **Enclosed vial contains dilute preservative and caution should be exercised. This testing unit also contains preservatives in the sample bottle. Tap unit in upright position to drain preservatives from cap. Do not rinse bottle before collection.** 2. Do not open the bottle until ready to collect the sample. Do not touch the inside of cap or bottle. 3. Do not rinse the bottle with sample. Select a clean faucet without attachments or leaking stem. Allow water to run for about ten minutes at full flow from the sampling tap. 4. Reduce flow to avoid splashing, and collect the sample directly into the bottle. Do not use an intermediate container. **Fill to 1" below top of bottle. Cap and invert 5 times to mix sample with preservatives. Carefully add all preservative in vial to sample bottle. Cap the sample and mix sample. Rinse vial and return.**
36CC	1. **There must be a minimum of 6 hours during which there is no water used in the house/facility before the sample is collected. Do not flush the sample tap before collection.** 2. Do not open the bottle until ready to collect the sample. Do not touch the inside of cap or bottle. 3. Place bottle under faucet and **collect cold water (run water at a high flow rate)** from a kitchen or bathroom sink or a faucet from which water is typically drawn for consumption. 4. **Complete a separate form for each sample.** Write the sampling point on the sample bottle label in the space for Sample ID. 5. Sample must be received in the laboratory within 14 days of collection.

*** NOTE:** Some tests require thermal preservation. If you received your kit with an ice pack, please ensure that the **ice pack is frozen** prior to return shipment to the laboratory.

UPS/FED EX and SAMPLE DROP-OFF
Drinking Water Laboratory
Michigan Dept. of Environmental Quality
3350 N. Martin Luther King Jr. Blvd.
Lansing, MI 48906

US MAIL SHIPPING ADDRESS
Drinking Water Laboratory
Michigan Dept. of Environmental Quality
PO Box 30270
Lansing, MI 48909