

# REQUEST FOR WATER ANALYSIS – PFAS

COMPLETE ALL PARTS OF THIS FORM. PRINT LEGIBLY IN INK TO ENSURE YOUR SAMPLE IS ACCEPTED. SEE REVERSE SIDE FOR INSTRUCTIONS.

## SAMPLE COLLECTION INFORMATION

Date Collected: \_\_\_\_\_ Time Collected: \_\_\_\_\_ ☐ AM ☐ PM

Sample Collector's Name (first and last): \_\_\_\_\_

☐ Check this box to test your sample only if it meets all method and regulatory requirements.  
If you do not check this box, your sample will be tested regardless of condition received and you will be charged.

## SAMPLE INFORMATION

Does this sample contain Chlorine? ☐ Yes ☐ No WSSN or Pool ID: \_\_\_\_\_

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

Enter Selection ☐

0 – Single Family Dwelling  
1 – Type 1 (25 or more residents year round)  
2 – Type 2 (25 or more persons 60 days or more per year)  
3 – Type 3 (All other public supplies)  
8 – Swimming Pool/Spa  
9 – Other

Enter Selection ☐

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

Enter Selection ☐

### Sample Collection Address:

Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_ County: \_\_\_\_\_

Township: \_\_\_\_\_  
Section: \_\_\_\_\_  
Well/Source ID: \_\_\_\_\_  
Site Code/Permit ID: \_\_\_\_\_

### Supply Owner/Business Name:

### Sampling Point:

☐ Kitchen Sink ☐ Bathroom Sink  
☐ Other: \_\_\_\_\_

## REPORT RESULTS TO

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## BILLING INFORMATION

Name: \_\_\_\_\_ EGLE Drinking Water Lab Account #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## TESTING INFORMATION

Check	Test Code	Sample Container	Test Description	Fee
<input checked="" type="checkbox"/>	CPFAS	36PF	Per- and Polyfluorinated Alkyl Substances	\$ 290.00

\*\*\*FOR LAB USE ONLY\*\*\*

Sample Receipt Temperature: \_\_\_\_\_ °C

Received on Ice: Yes No

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## 1. SAMPLE COLLECTION INFORMATION

- Verify the collection date and time are listed, accurate, and legible.
- Verify the sample collector name is listed, accurate, and legible.

## 2. SAMPLE INFORMATION (Some information may not be applicable for private homeowners)

- Routine = normal compliance monitoring
- Repeat = follow-up sampling after detections
- Repair/New Well = investigative sampling for new wells, repair of a well, seasonal start-up sampling, or post-construction sampling
- WSSN = Water Supply Serial Number
- Type 1 = public community water supply (supplies with 5-digit WSSNs)
- Type 2 = public noncommunity water supply (supplies with 7-digit WSSNs beginning with a “2”)
- Type 1 or Type 2 water supplies must include:
  - WSSN
  - Water supply name and address
  - Well/Source Number (for Type 2 supplies)
  - Site Code from Annual Monitoring Schedule (for Type 1 supplies)
- Sampling point **must be** filled out for all samples.
- If you need help filling out your sample collection information, contact your EGLE district office, or the EGLE Drinking Water Laboratory at (517) 335-8184.

## 3. RESULTS AND BILLING CONTACT INFORMATION

- If you would like results by email, include only **one** email address.
- Provide complete and legible contact information to receive results.

## 4. TESTING INFORMATION

- Verify check box is checked for test code request.
- View a complete list of the test codes offered at [www.michigan.gov/EGLELab](http://www.michigan.gov/EGLELab), select “Drinking Water Laboratory”, then “Drinking Water Test Fees.”
- Each sample kit must have its own request form.

**Return your Sample(s) to the Michigan EGLE Drinking Water Laboratory overnight using one of the methods below:**

### Sample Drop off

You must call in advance to drop your samples off. Call 517-335-8184.

Michigan EGLE Drinking Water Laboratory  
3350 N. Martin Luther King Jr. Blvd.  
Lansing, Mi 48906  
Closed Weekends and Holidays  
M-F 8:00am- 4:30pm

### UPS-FedEx

Michigan EGLE Drinking Water Laboratory  
3350 N. Martin Luther King Jr. Blvd.  
Lansing, Mi 48906

Ship Monday thru Thursday only

### USPS/US Mail

Michigan EGLE Drinking Water Laboratory  
3350 N. Martin Luther King Jr. Blvd.  
Lansing, Mi 48906

Mail Monday thru Thursday only