

Bacteriological Private Well Water Collection Form

Collectors Information			
Collector Name (Last, First):		Phone:	
Address:	City:	State:	Zip:
Collection Information			
Collection Date:		Collection Time:	
Shipping Guidelines			
<ol style="list-style-type: none"> 1. This sample will only be analyzed for <i>E. coli</i> and total coliform bacteria. For chemical analysis please visit https://deg.nd.gov/chemistry/services.aspx or contact Division of Chemistry at 701-328-6140. 2. This test kit is for private home well water testing only. 3. Collect and ship the sample to ensure arrival at the laboratory within 30 hours of collection. 4. Mail samples on a Monday-Wednesday excluding state and federal holidays. Check with your shipper, you may need to ship express. Use the enclosed mailing label and add proper postage. 5. Samples can be dropped off by 4:00 PM daily at the laboratory Monday through Thursday. Samples that exceed holding time are not tested. 6. Samples are not accepted on Fridays. <p>Ship To: North Dakota Department of Health and Human Services Public Health Division, Laboratory Services 2635 East Main Ave. Bismarck, ND 58506</p>			
Collection Guidelines			
<p>The sample tap must be free of any aerator, strainer, hose attachment or water purification device.</p> <ol style="list-style-type: none"> 1. Do not rinse the sample bottles. It is sterile and contains a chemical additive. 2. Open the cold water tap fully and allow the water to run for 3 to 5 minutes. 3. Restrict the flow to allow the collection of the sample without splashing. 4. Fill the sample bottle to the "fill line" on the bottle. 5. Enclose payment of \$25.00. Testing will not be performed without payment. Please use exact change or write check. <input type="checkbox"/> _____ Cash <input type="checkbox"/> _____ Check 6. We will mail report to address listed above. If you would like report emailed, please indicate below. <input type="checkbox"/> I would like my report emailed to: _____ 			