**Raven Analytical Laboratory, LLC**

**A State Certified Laboratory #9954**

****104 ½ North First Street

P.O. Box 807

Roscommon, MI 48652

Phone: (989)275-4790/Fax: (989)275-4899

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FOR LAB USE ONLY** |  |  |  |  |
| Sample #  |   |
| Date Received |   |
| Time: |   |
| Received by: |   |
| N/N Temperature:  |   |

**REQUEST FOR WATER ANALYSIS**

A form is required for each request for water analysis. All results will be sent either by mail, email or fax to the requesting party only. **WATER SAMPLES ARE ACCEPTED M, T, W, R ONLY BETWEEN 9-3 PM**

|  |  |  |
| --- | --- | --- |
| **PLEASE INDICATE WHICH TESTS ARE REQUESTED ON THE TOP OF BACK PAGE** |  |  |
| Payment must accompany sample unless account has been previously established**.**  |
| Make Checks Payable to: Raven Analytical Laboratory  | Total Amount Due$ |   |  |  |  |  |  |
|  |  | Method Paid: |   |  |  |  |  |  |  |

Sample Collector Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Collected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time Collected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A.M. / P.M. (Circle one)

Site/Owner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Township: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail to Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing/Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Need copy sent to Local Health Dept:  |  |  | YES | or | NO |  |  |
| Please Circle: Disinfected | Removed Aerator | Chilled |  |  |  |  |  |  |
| ***Sampling Point:*** |  |  |  |  |  |  | OTHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|   | Kitchen |   | Outside Faucet |  |   | Bath |  |  |  |  |
|   | Hand Pump |   | Drinking Fountain |   | Well Tap etc.  |  |  |
| ***Sampling Source:*** |  |  |  |  |  |  |  |  |  |
|   | Single Family Dwelling |   | Municipal |  |   | Surface Water: Pool/Spa/Lake/Pond |
|   | Type I  |   | Type II WSSN# |   |   | Type III |  |  |  |
| ***Sampling Purpose:*** |  |  |  | (All other public supplies, duplex, small office, etc.) |
|   | Routine Monitoring |   | Repair/Construction/New Well |  |  |  |  |  |  |
|   | Real Estate Transaction |   | Water Quality Problem |  |  |  |  |  |  |
|   | Repeat Sample |   | Other |  |  |  |  |  |  |  |
|   | Seasonal Start Up #1 #2 |  | Comments: |  |  |  |   |  |  |   |

|  |  |
| --- | --- |
| Please indicate which tests are requested: |  |
|  **~Basic Testing~** |  | Cost/Sample |
|   | Bacteria test ONLY (Total Coliform & E. Coli)  |   | $35.00  |
|   | Bacteria & Nitrate/Nitrite (Single Family Dwellings & Private Wells) |   | $45.00  |
|   | Nitrate/Nitrite (Public Water Systems) | $30.00  |
|   | Partial Chemistry (sulfate, N/N, Chloride, Iron, Hardness, pH |   | $75.00  |
|  | **or Each Separately** |  |  |   | $25.00  |
|  |
|  ~**Additional Testing~** |
| All testing at this laboratory is done using Environmental Protection Agency (EPA) approved/accepted methods. |
| The tests listed below, may not be suitable for reporting purposes for public water systems. |
|   | Bacteria Plate Count Drinking  |   | $36.00  |
|   | Lead Screen  |   | $45.00  |
|   | Arsenic Testing |   | $30.00  |
|   | Beach Plate Count/ PC-Heterotrophic Plate Count |   | $42.00  |
|   | Other |  |  |
|  |  **Please call for a complete list and prices for available testing** |

**PRICES ARE SUBJECT TO CHANGE EFFECTIVE 07/01/2025**

**Water Laboratory Collection and Shipping Instructions**

***Please Read Before Collecting Water Samples***

1. Complete all sections of the *Sample Analysis Request –Chain of Custody Form* in **ink** for each set of samples submitted. It is imperative that you include both the collection date and time in order for your results to be accurate.
2. Include appropriate fee with sample.
3. **Samples are accepted Monday 9am through Thursday at 3pm and must be kept cold during transit. Shipped samples should be in a cooler with non-leaking cold packs**

**BACTERIA SAMPLES**

*(Sealed, sterile clear bottle; contains preservative)*

* Wash hands prior to taking sample.
* Do not open the bottle until you are ready to collect the sample.
* Do not rinse the bottle. It contains a chemical to neutralize any residual chlorine in the sample.
* Remove the plastic seal before collecting the sample. Do not touch the inside of the cap or set cap down.
* Select a clean, Cold-water faucet and remove attachments such as aerators (small screen), and hose connections, etc.
* If your well has been chlorinated, make sure all chlorine has been flushed out of the water supply before the sample is collected.
* Spray faucet with a commercial disinfectant or 10% bleach solution and allow to sit for 3-4 minutes. Allow the COLD water tap to run for about 10 minutes.
* Reduce flow of water and fill sample container to the **100 mL line on the bottle (do not fill beyond the neck of the bottle).** Samples containing less than 100 mL will not be accepted. Replace and tighten cap.
* Transport sample to laboratory within 30 hours of collection.

**Compliance samples will be rejected if not analyzed within the 30-hour holding period.**

* **SURFACE WATER SAMPLES (lakes, ponds, pools, spas): Must be received by laboratory within 6 hours of sample collection.**

 **NITRATE SAMPLES**

*(Opaque bottle)*

* Flush the sample tap for ten (10) minutes prior to collecting the sample.
* Reduce flow of water and fill sample container to the shoulder of the bottle. Replace and tighten cap and make sure it is not leaking.
* It is required that you transport samples with an ice pack to laboratory within 48 hours of collection.

**Compliance samples will be rejected if not analyzed within the 48-hour holding period.**

* **EGLE (Environment, Great Lakes, and Energy) requires samples to be chilled to 4 + / - 2 degrees Celsius**