

Sample Receipt Information

Date: Bacteria Batch ID: Time:

Initials:

Condition: Chemistry Batch ID:

Temp°C:



Seine Rat Roseau Watershed District

Horizon Lab Customer ID: SC

This form and pricing are only valid for the following testing days: May 19, 2022 and June 16, 2022

Shaded areas are for LAB USE ONLY

Custom	er Infori	mation – MAILING address:												
Na	me:			Stree	et / Box #:									
Phone#:		Town:												
Email:				Po:	stal Code:									
	As a part of our Going Green initiative, we will provide you with an electronic copy of your results (email) unless no email address is provided.													
Test Pkg Code (Check off)		Test Packages					Bottle Requirements	Price per sample						
□ B1		Bacteria – Total Coliform and E. Coli - Subsidized *Add \$5.00 for non-subsidized sample					1 x 100ml sterile	\$25.00*						
☐ Mi2HL		Advanced Drinking Water Quality: Calcium, Magnesium, Sodium, Potassium, Manganese Zinc, Iron, Nitrogen-Nitrate, Nitrogen-Nitrite, Chloride, Sulfate, pH, Hardness, Conductivity, Arsenic, Boron, Barium, Fluoride, Uranium					1 x 500ml	\$130.00						
☐ Mi2HL+		Advanced Drinking Water Quality: Calcium, Magnesium, Sodium, Potassium, Manganese Zinc, Iron, Nitrogen-Nitrate, Nitrogen-Nitrite, Chloride, Sulfate, pH, Hardness, Conductivity, Arsenic, Boron, Barium, Fluoride, Uranium, LEAD, COPPER					1 x 500ml 1 x 1L	\$160.00						
			S	ample Infor	mation									
Lab Sample ID		Sample Description / ID	Sample	Date	Time Sampled		Legal Location	Town						
Bacteria	Chem	(Where was sample taken from ex: Kitchen)	Туре	Sampled	Time Sample	.u	(Ex. SW 21-2-9 or 123 Smith St.)	Rural Municipality						
			☐ Raw			□ АМ								
			☐ Treated			□РМ								

A Copy of your results may be shared with the Watershed District at their request.

Customer Signature:	Customer Signature:		
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*Note: For Bacteria Samples received between 30 and 48 hours from collection time, only a presence / absence test will be performed. If this is not acceptable check here \square and your sample will be discarded if over 30 hours. **See page 2 for details.

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West Interlake Watershed District Analysis Request

BACTERIAL SAMPLE REQUIREMENTS (B1)

- Samples must be submitted in sterile bottles supplied by Horizon Lab.
- Samples must be kept cool and must arrive to the lab within 24 hours of sampling.
- Samples tested after 30 hours will only have a presence / absence result.
- Samples will not be tested after 48 hours from the time of sampling.
- Samples must be packed in such a way to minimize potential damage. Horizon Lab is not responsible for any cost arising from damage caused to samples prior to receipt in the lab.
- DO NOT allow sample the sample to freeze.

BACTERIAL SAMPLING INSTRUCTIONS

- If the sample is collected from an indoor tap, remove the aerator screen from the end of the tap.
- Sterilize the end of the tap as follows:
 - a. If the faucet is made of metal, flame it for 20 seconds with a lighter
 - b. Use either 5.25% bleach or 60% isopropyl alcohol to disinfect the end of the tap.
- Allow cold water tap to run for 2-3 minutes prior to sampling.
- Remove the plastic seal from the sterile bottle and unscrew the cap (do not touch the inside of the cap or bottle).
- DO NOT rinse the bottle.
- Fill to the 100ml line indicated (or above) on the bottle.
- Cap the bottle being careful not to contaminate the cap.
- Record the date and time of sampling on the bottle label. If submitting more than one sample, clearly identify each sample on the label and the form(s).
- Keep the sample cool and submit to the lab.

CHEMICAL SAMPLE REQUIREMENTS ()

- 500 ml of sample is required for chemical tests.
- An additional 1L is required for Copper and Lead analysis.
- Samples should be submitted in HDPE bottles supplied by Horizon Lab.
- Samples must arrive to the lab within 36 hours of sampling.
- Samples must be packed in such a way to minimize potential for breakage. Horizon Lab
 is not responsible for any costs arising from damage caused to samples prior to receipt
 in the lab.

CHEMICAL SAMPLING INSTRUCTIONS:

- Allow the cold water tap to run for 2-3 minutes prior to sampling.
- Rinse the bottle thoroughly by filling it part way with water, capping it, shaking it, and discarding.
- Repeat rinsing process.
- Fill the 500ml container completely with the sample and tighten the cap.
- Label the bottle with the date and time of sampling. If submitting more than one sample, clearly identify each sample on the label and form.

***Samples received up to 30 hours from collection time will have a quantitative result (ex. 45MPN). Samples received between 30 hours and 45 hours will have a qualitative result (ex. Coliform Bacteria Present. If not acceptable is checked off, testing will not be performed, and customers will receive notification by phone or email.

SAMPLE SUBMISSION

See Watershed District specific instructions.

PROCESSING TIME:

 BACTERIA sample Certificates of Analysis will be sent to the customer within 7 days. CHEMISTRY sample Certificates of Analysis will be sent to the customer within 14 days.

Disclaimer: Horizon Lab does not provide advice or consultation with respect to the water test results. Please contact the Manitoba Water Stewardship Office of Drinking Water at (204) 945-5762 if you need information.

Limitation of liability. In no event shall Horizon Lab Ltd. or its partners, employees, agents or affiliates be liable for damages of any kind including, without limitation, any direct, special, indirect, punitive, incidental or consequential damages including, without limitation, any loss or damages in the nature of or relating to lost business or lost profits arising from your use of or reliance upon any test performed by Horizon Lab Ltd. regardless of the cause and whether arising in contract (including fundamental breach), tort (including negligence), or otherwise.

Personal information is collected under the authority of The Drinking Water Safety Act and its pursuant regulations and is used for private well surveillance purposes. Information collected is protected by the privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions, contact the Access & Privacy Coordinator, 200 Saulteaux Cr., Winnipeg, MB R3J 3W3, 204-945-4170. By participating in this program, you agree to allow Manitoba to share your results, including personal contact information, with third parties such as local authorities for the sole purpose(s) of pattern surveillance.

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