



BACTERIOLOGICAL WATER ANALYSIS
Teton County Health Department Water Lab
460 East Pearl Ave PO Box 937 Jackson, WY 83001
(307)732-8490

Drinking Water Tests: Due Mon/Tues by 2pm. \$20.00 each
Pool/Spa Water Tests: Due Tues by 12pm. \$20.00 each

TYPE PUBLIC PRIVATE USFS NPS
S\y k#- WELL SPRING POOL SPA

PWS# (IF PUBLIC) _____ REGULATORY AUTHORITY _____

u h- \ 7o° U hQ ROUTINE REPEAT TRIGGERED SPECIAL _____

NAME/ FACILITY _____

PHYSICAL ADDRESS _____

SAMPLE LOCATION SPECIFICS (Kitchen, bathroom, etc...) _____

CHLORINE RESIDUAL _____ ppm pH _____

COLLECTED BY _____ DATE _____ TIME _____

*** SAMPLES CANNOT BE MORE THAN 30 HOURS OLD AT THE TIME OF ANALYSIS ***

EMAIL RESULTS TO: _____

PHONE NUMBER FOR UNSAFE SAMPLES: _____

FOR LABORATORY USE ONLY

PAYMENT CASH CREDIT CARD CHECK # _____ ACCT

SAMPLE CONDITION: GOOD INSUFFICIENT OLD

SAMPLE ID# _____ DATE RECEIVED _____ TIME _____

ANALYSIS DATE _____ TIME _____

COLILERT-18 SPC OTHER _____

VERIFIED COUNT _____

FINAL ANALYSIS: SAFE/ABSENCE UNSAFE/PRESENCE RE-SAMPLE

REMARKS _____ ANALYST _____



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