



LAB ID# TX48101

WATER BACTERIA TEST REQUEST FORM

SEND THIS REPORT TO (Please print clearly):

Name: _____
 Address: _____
 City, State, Zip: _____
 Phone (home): _____ Phone (cell) _____

LABORATORY USE ONLY:

Received By:		Paid?
Date/Time Received:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Temperature (°C):		Receipt #
Sample ID #		

Please complete the Sample Information section below regarding your water sample. **The Collection Date and Collection Time are required** in order for the ANRA Environmental Laboratory to analyze the sample. The other information is not required, but is useful in helping us interpret your results and offer recommendations.

SAMPLE INFORMATION:

Collection Date and Time (required):

Collection Date: ____/____/____ Time: ____:____ am / pm

Collected By: _____

Address where sample collected (if other than listed above):

Name: _____

Address: _____

City, State, Zip: _____

Reason for Test:

- Annual Test
- New Well
- Real Estate
- Suspect Contamination
- Recent Disinfection/Previous Unsafe
- Other: _____

Sample Location:

- Outside Tap
- Kitchen Tap
- Bathroom Tap
- Pressure Tank Tap
- Spring
- Other: _____

ANALYSIS REQUESTED:

The analysis performed by the ANRA Environmental Laboratory tests for the presence of both Total Coliform and *E. coli* bacteria. The presence of coliform or *E. coli* bacteria indicates that the water is unsafe to drink due to contamination. Two different tests are offered. Please select the test you would like to have performed on your sample.

PRESENCE/ABSENCE

*This test determines if E. coli and/or Total Coliform are present in a drinking water sample. Because the presence of even one coliform makes the water unsafe for consumption, results are reported simply as Present or Absent. This test would be selected if you are wanting to determine if your well water is safe to drink. **The sample must be received within 24 hours of collection.***

ENUMERATION

*This test provides a count of the number of E. coli bacteria present in a water sample. This test is used to determine if the water is safe for contact recreation, and is performed primarily on ponds, creeks, and pools., or when sewage contamination is suspected. This analysis would also be used to test irrigation water. **The sample must be kept on ice, and must be received within 6 hours of collection.***

LABORATORY RESULTS:

PRESENCE/ABSENCE

Total Coliform

- Present
- Absent

E. coli

- Present
- Absent

If either Total Coliform or *E. coli* bacteria were **Present** in your sample, the water is considered **UNSAFE** to drink. It is recommended that you disinfect your well (instructions available). It is also recommended that an additional sample be analyzed following disinfection to verify that bacteria is no longer present.

If both Total Coliform and *E. coli* were **Absent** in your sample, the water is considered **SAFE** to drink.

Unsuitable for Analysis

The sample was rejected or the results were inconclusive due to the following reason(s):

- Sample too old. Sample not received with 24 hours of collection for Presence/Absence or 6 hours for enumeration.
- Quantity insufficient for analysis. 100 mL of sample is required.
- Excessive chlorine present. Please flush the lines and recollect.
- Heavy Silt/Turbidity present. This could result from sediment in the sample or growth of non-harmful bacteria. Disinfect and flush the lines prior to recollecting a sample.
- Form Incomplete / Date Discrepancy
- Other: _____

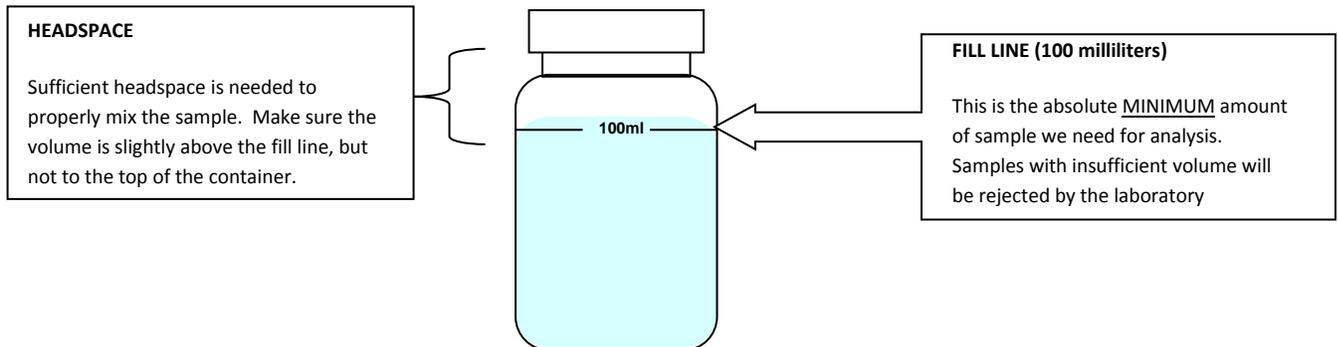
ENUMERATION

- Please see attached Laboratory Analysis Report. Results are reported as MPN/100 mL.

Tested By:	
Date/Time Tested:	
Reported By:	
Date/Time Reported:	
Method:	<input type="checkbox"/> IDEXX <input type="checkbox"/> 9223 <input type="checkbox"/> 9221

Proper Collection of Drinking Water Samples for Coliform Analysis

- 💧 **You must use the sample container provided by the laboratory.** This container has been sterilized and contains a special chemical (in the form of a white powder) that is required for the test.
- 💧 Find a proper location to take a sample, preferably an outside faucet that does not leak. Remove any hoses (if present) prior to collecting a sample.
- 💧 If an inside faucet is used, remove any aerators or filtration systems (if present) prior to collecting a water sample.
- 💧 Do not collect on windy or rainy days, as this could lead to contamination of the sample.
- 💧 Sterilize the faucet from which the sample is to be collected in order to eliminate any bacteria present on the faucet which may contaminate your sample. The faucet may be sterilized by using one of the following methods:
 - Use a swab with bleach to wipe the inside and outside of the faucet opening. Rinse the outside lip well with water.
 - Use a flame (such as a lighter) to sterilize the faucet. Do not use a match, as this could leave soot on the faucet which could contaminate the sample. This method should only be used on outside faucets, as inside faucets could be discolored or tarnished.
- 💧 Turn on the cold water, and allow the faucet to flow for 2 – 3 minutes in order to clear the line. Reduce the flow to a slow, steady, and sprayless stream in order to collect the sample.
- 💧 Remove the sterility seal from the sample container and discard.
- 💧 Remove the cap from the sample container, taking care not to touch the inside of the lid or the lip of the container.
- 💧 **DO NOT RINSE THE SAMPLE CONTAINER.** The container contains a powder residue which is required for the test.
- 💧 Fill the sample container only to the neck of the container or the fill line, and seal tightly.



- 💧 Complete the **WATER BACTERIA TEST REQUEST FORM**. Make sure that Collection Date and Collection Time are completed, as these are required fields.
- 💧 Submit the sample to the Angelina & Neches River Authority Environmental Laboratory, located at 210 Lufkin Ave, Lufkin, TX, **within 24 hours of collection**. Samples are accepted **Monday – Thursday, 8:00 AM – 4:00 PM**.

Angelina & Neches River Authority

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Lufkin, TX 75901
Phone: (936) 632-7550
Fax: (936) 633-7799
www.anra.org

