

Private Surface Water Sample Request

(Samples will not be analyzed without this form)

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| SAMPLE INFORMATION | |
| Surface Water Tested: | |
| Address (sample location): | City: Zip Code: |
| Sample Location (example "Center beach, Right of dock, etc." | "): |
| Sample Type: Routine Other special purpose sample | Sample Collection Date:// Time:: a.m p.m. |
| • | 24 hours after sample taken) <i>Thursday after 11:30 am or Friday</i> . |
| SAMPLER INFORMATION: | |
| **Results will be notified by mail/email for results under 235 Sampler Name (if different): | |
| Mailing Address (if different): | City: Zip Code: |
| Telephone Number (if different): | E-mail (if different): |
| Comments: LAB TEST RESULTS (Laboratory | Use Only) |
| Laboratory Results | Approved Enzyme Substrate Method |
| ☐ Safe (Low level Fecal/E. Coli) | (Each method requires 100 mL of sample) ☐ Colilert® ☐ Colisure® |
| ☐ Advisory (Elevated Level Fecal/E. Coli Present) ☐ MPN ☐ Unsafe (High Level Fecal/E. Coli Present) ☐ MPN Advisory or Unsafe Levels: Date/Time Sampler was contacted: | Tested: Date / / Time:: □ a.m. □ p.m. Initials: |
| | Completed: Date/ |
| □ Invalid (Submit another Sample) □ Old □ Frozen □ Overgrown □ Lab Accident □ Chlorine Present □ Shipping Problem | |
| Laboratory Name Chippewa County Department of Public Health | Sample ID |
| WI Bacteriological Certification Number 105-543 | Laboratory Phone Number (715) 726-7900 |

(Refrigerator temperature if used; temp 1-5 °C)

Records will be disposed of after 7 years from sample date.

Chippewa County Department of Public Health, 711 N. Bridge St., Rm 121, Chippewa Falls, WI 54729

Phone: 715-726-7900, Fax: 715-726-7910, Email: <u>kwalters@co.chippewa.wi.us</u>

Bacteria Only_____ Bacteria and Nitrate_____ Bacteria, Nitrate, other_____

WI DNR Beach Water Standards • If the *E. coli* count is greater than 1,000 MPN/100 (Step 1) mL, the beach is unsafe for swimming. Enter the body of water to be tested in roughly the center If the E. coli count is greater than 235 MPN/100 mL of the beach/water area to be tested to knee depth (24but less than 1,000 MPN/100 mL, swim at your 30 inches deep). own risk. Take care not to stir up the bottom sediment while If the E. coli count is under 235 MPN/100 mL, walking out. enjoy the water. https://dnr.wisconsin.gov/topic/Beaches (Step 2) (Step 3) Uncap bottle and plunge the bottle mouth first straight Remove bottle from water. Dump excess water out of the into the water to a depth of 6-12 inches. Tip bottle to allow sample. captured air to release and water to enter. Fill with at least 100ml (to the line), but do not fill into the neck of the bottle. If current is present face the bottle into the current and away from your hand. Fill bottle completely. (Step 5) Bring the water sample and completed sample form to (Step 4) Replace cap securely and write your name on the side of Chippewa County Public Health on the first floor of the bottle and fill out other side of this form. Leave 1" Government Center in Chippewa Falls, East entrance. headroom (air) at the top of the bottle. We will NOT accept a sample on Thursday after 11:30 or Friday.

Chippewa County Environmental Health Program Private Well Pricing \$25.00.......Bacteria \$45.00.....Arsenic \$30.00......Nitrate (N+N) \$40.00....Lead \$20.00.....Manganese \$35.00....Surface Water E. Coli (Private Beach, Pond, etc.) Received by: _______ Paid: _______