Ontario Water Testing Centre

20 Currie Street Chatham, Ontario N7M 6L9
Phone: 519-351-8266 Email: Laboratory@OWTC.net

Sample Requisition Form

Accredited to ISO 17025:2017

REF#

Invoice Information:
Company Name: _____
Contact: _____
Address: _____
_____
Phone: _____ Fax: _____
E-Mail: _____

Report Information to
Company Name: _____
Contact: _____
Address: _____
_____
Phone: _____ Fax: _____
E-Mail: _____

Special Instructions:

PJLA Testing Accreditation #124341

Date Sampled:	Time Sampled:	Indicator Organism Enumeration	Pathogen Detection	
			Vidas	MDS
		One Swab or 11 gram sample	One swab or 25g / One swab or 125g	One swab or 25 gram

OWTC #	Sample #	Sample Description	Aerobic Count	Yeast & Mold	*S. aureus*	Coliform	*E.coli*	*Salmonella*	*Listeria spp. 24-48hr*	*Salmonella*	Listeria spp. 24hr	*Listeria Monocytogenes*	*E. coli* O157	STEC	STEC*Duo	Other

Date Tested:	Relinquished by:	Temp °C:	Received by:	Date & Time Received: