



micro air, inc.

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Lab Number _____

Date Received _____

Time Received _____

Analyst _____

Time Incubated _____

(Please Print Neatly)

Pool Water Sample Submission Form

| | |
|---|---|
| Client Information | |
| Customer/Company Name: | Phone: |
| Report Attention: | Email: |
| Address: | City: State: Zip: |
| Sample Information | |
| Pool Name: | |
| Pool Address: | City: State: Zip: County: |
| Sample Collected By: | Date Collected: Time Collected: |
| Pool Sampled (Circle One): | Main Pool Spa/Hot Tub Bathing Beach/Lake Plunge Pool Other _____ Wading Pool Dive Well Splash Pad Leisure Pool |
| Analysis Data (To Be Completed by Laboratory) | |
| <p>Test: Total Coliform</p> <p>Method: <input type="checkbox"/> MMO-MUG P/A <input type="checkbox"/> MMO-MUG QT</p> <p>Result: Present: <input type="checkbox"/> MPN_____/100mL Absent: <input type="checkbox"/></p> <p>Analyst: _____ Date: _____ Time: _____</p> | <p>Test: <i>E. coli</i></p> <p>Method: <input type="checkbox"/> MMO-MUG P/A <input type="checkbox"/> MMO-MUG QT</p> <p>Result: Present: <input type="checkbox"/> MPN_____/100mL Absent: <input type="checkbox"/></p> <p>Analyst: _____ Date: _____ Time: _____</p> |
| <p><i>If QT is checked the result is organisms per 100mL. If P/A is checked the result is Presence (P) or Absence (A).</i></p> | |
| <p>Test: Heterotrophic Bacteria</p> <p>Method: Simplate Technique</p> <p>Result: _____/1.0mL</p> <p>Analyst: _____ Date: _____ Time: _____</p> | <p>Result Status:</p> <p><input type="checkbox"/> Satisfactory</p> <p><input type="checkbox"/> Unsatisfactory</p> <p><input type="checkbox"/> Follow-up Action is Required (see below):</p> |
| <p>Micro Air, Inc. is a state certified drinking water laboratory, # M-49-5. Samples were analyzed according to EPA Approved MMO-MUG Presence/Absence Test Procedure and the Heterotrophic Plate Count Test Procedure for pool water. Micro Air, Inc.'s laboratory is in compliance with the quality assurance as specified by the method.</p> <p>This report may not be reproduced, except in full, without written approval from Micro Air, Inc., and only relates to the items tested.</p> | <p><input type="checkbox"/> Submit Repeat Sample (as required under 327 IAC 8-2-9.1)</p> <p><input type="checkbox"/> Sample was Rejected Because:</p> <p><input type="checkbox"/> Too long in transit</p> <p><input type="checkbox"/> Invalid or no collection date and/or time</p> <p><input type="checkbox"/> Sample leaked or broken in shipment</p> <p><input type="checkbox"/> Insufficient volume</p> <p><input type="checkbox"/> Residual chlorine present</p> <p><input type="checkbox"/> High background count</p> <p><input type="checkbox"/> Other _____</p> |