## WATER TESTING FORM FOR PRIVATE WATER

Send results via:   Mail   Called   Phone #:   Phone #:		WAIL	112311110			I INIVALE VV	A1EIX		
Applicable Phone/Fax/E-mail:    Submitter Name	` '			Collecte	ed by:	Phone #:			
Street Address   City, State, Zip Code	results				Mail	☐ Call	□Fax	☐ E-mail	
City, State, Zip Code  Client Name (if different from submitter)  City and County  Well Owner Name (if different from above)  Well Address  City and County  Sampling Information - Reason for Test: Annual Test		Submitter Name			☐ Called				
Client Name (if different from submitter)  Client Name (if different from submitter)  City and County  Well Owner Name (if different from above)  Well Address  City and County  Sampling Information - Reason for Test: Annual Test		Street Address							
Street Address   City and County		City, State, Zip Code							
City and County    Well Owner Name (if different from above)   Called		Client Name (if diff	ferent from su	bmitter	itter)				
Well Owner Name (if different from above)		Street Address							
Well Address		City and County							
City and County		Well Owner Name (if different from above) ☐ Called						d	
Sampling Information - Reason for Test:  Annual Test		Well Address							
□ Annual Test □ Previous Unsafe   □ Taste or Odor □ Real Estate   □ Other Reasons: □ Jetted □ Other:   □ Bathroom Tap □ Pressure Tank Tap □ Nitrate test \$27 (P/A Enzyme Substrate)   □ Kitchen Tap □ Outside Faucet □ Nitrate test \$27 (P/A Enzyme Substrate)   □ RO System □ Lead test \$29 (Requires additional sample)   □ Other: □ Metals test \$105 (Requires additional sample)   □ Arsenic test \$31 (Requires additional sample) □ Arsenic test \$31 (Requires additional sample)   □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic) □ Other   □ Other □ Frush, additional fees will apply   □ SAFE (Coliform Absent) □ SAFE (Coliform Present) and:   □ SAFE (Coliform Present) □ Fecal/E coli Present   □ Fecal/E coli Absent Nitrate: mg/L as N   Lead: μg/L   Arsenic: μg/L   Date/Time Received:		City and County							
□ Annual Test □ Previous Unsafe   □ Taste or Odor □ Real Estate   □ Other Reasons: □ Jetted □ Other:   □ Bathroom Tap □ Pressure Tank Tap □ Nitrate test \$27 (P/A Enzyme Substrate)   □ Kitchen Tap □ Outside Faucet □ Nitrate test \$27 (P/A Enzyme Substrate)   □ RO System □ Lead test \$29 (Requires additional sample)   □ Other: □ Metals test \$105 (Requires additional sample)   □ Arsenic test \$31 (Requires additional sample) □ Arsenic test \$31 (Requires additional sample)   □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic) □ Other   □ Other □ Frush, additional fees will apply   □ SAFE (Coliform Absent) □ SAFE (Coliform Present) and:   □ SAFE (Coliform Present) □ Fecal/E coli Present   □ Fecal/E coli Absent Nitrate: mg/L as N   Lead: μg/L   Arsenic: μg/L   Date/Time Received:	Sampling	Information - Re	ason for Tes	t:	We	ell Constructio	on Informatio	n:	
□ Taste or Odor □ Real Estate □ Other Reasons:  Sample Location: □ Bathroom Tap □ Pressure Tank Tap □ Kitchen Tap □ Outside Faucet □ Nitrate test \$27 (P/A Enzyme Substrate) □ Nitrate test \$27 (Requires additional sample) □ Arsenic test \$32 (Requires additional sample) □ Arsenic test \$31 (Requires additional sample) □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic) □ Other □ If rush, additional fees will apply  Payment Method: □ Cash □ Check □ BILL □ Credit Card Check □ BILL □ Credit Card Check □ SAFE (Coliform Absent) □ UNSAFE (Coliform Present) and: □ Fecal/E coli Present □ Fecal/E coli Present □ Fecal/E coli Absent  Nitrate: □ mg/L as N Lead: □ μg/L  Arsenic: □ μg/L  Date/Time Received:		_		I —		_			
Other Reasons:	_					U	L DIIVEII F	,,,,,	
Sample Location:	☐ Taste c	or Odor 🔲 Rea	I Estate			_			
Sample Location:  □ Bathroom Tap □ Pressure Tank Tap □ Kitchen Tap □ Outside Faucet □ Nitrate test \$27 (4500 NO₃ D) □ Lead test \$29 (Requires additional sample) □ Metals test \$105 (Requires additional sample) □ Metals test \$105 (Requires additional sample) □ Arsenic test \$31 (Requires additional sample) □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic) □ Other □ If rush, additional fees will apply □ Laboratory Results □ Cash □ Check □ BILL □ Credit Card □ Check □ BILL □ Laboratory Results □ SAFE (Coliform Absent) □ UNSAFE (Coliform Present) and: □ Fecal/E coli Present □ Fecal/E coli Absent □ Fecal/E coli Absent □ Nitrate: □ mg/L as N Lead: □ μg/L Arsenic: □ μg/L Date/Time Received:	☐ Other I	Reasons:			•	ell #:			
Bathroom Tap   Pressure Tank Tap   Nitrate test \$27 (P/A Enzyme Substrate)   Nitrate test \$27 (4500 NO <sub>3</sub> D)   Lead test \$29 (Requires additional sample)   Metals test \$105 (Requires additional sample)   Metals test \$105 (Requires additional sample)   Metals test \$105 (Requires additional sample)   Metals test \$31 (Requires additional sample)   Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic)   Other				II KI	iown				
□ Bathroom Tap □ Pressure Tank Tap   □ Kitchen Tap □ Outside Faucet   □ RO System □ Lead test \$29 (Requires additional sample)   □ Other: □ Metals test \$105 (Requires additional sample)   □ Arsenic test \$31 (Requires additional sample) □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic)   □ Other □ Other   □ Cash □ Check □ BILL   □ Credit Card Check # □ SAFE (Coliform Absent)   □ Lab Cerdit card transactions □ UNSAFE (Coliform Present) and:   □ Lab Cert # 013 □ Fecal/E coli Present   □ Fecal/E coli Absent □ Fecal/E coli Absent   Nitrate: mg/L as N   Lead: μg/L   Arsenic: μg/L    Date/Time Received:	Sample L	ocation:			·				
Kitchen Tap	_		Tauali Ta		☐ Bacteria test \$27 (P/A Enzyme Substrate)				
□ RO System □ Metals test \$29 (Requires additional sample)   □ Other: □ Arsenic test \$31 (Requires additional sample)   □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic)   □ Other □ Other   □ Frush, additional fees will apply   □ Cash □ Check   □ Credit Card Check #   □ 2.5% fee applied to credit card transactions   □ La Crosse County Health Laboratory   300 4th St N, La Crosse WI 54601 □ Fecal/E coli Present   □ Fecal/E coli Absent   Nitrate: mg/L as N   Lead: μg/L   Arsenic: μg/L    Date/Time Received:		· · ·			Nitrate test \$27 (4500 NO₃ D)				
□ RO System □ Metals test \$105 (Requires additional sample)   □ Other: □ Arsenic test \$31 (Requires additional sample)   □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic)   □ Other □ Other   □ frush, additional fees will apply      Cash □ Check □ BILL □ Credit Card Check # □ 2.5% fee applied to credit card transactions   La Crosse County Health Laboratory 300 4th St N, La Crosse WI 54601 Lab Cert # 013 □ SAFE (Coliform Absent) □ Fecal/E coli Present □ Fecal/E coli Absent   □ Fecal/E coli Absent Nitrate:		Kitchen Tap							
□ Other: □ OFFICE USE ONLY □ Arsenic test \$31 (Requires additional sample) □ Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic) □ Other □ If rush, additional fees will apply □ Credit Card □ Check □ BILL □ Credit Card □ Check #  2.5% fee applied to credit card transactions □ SAFE (Coliform Absent) □ UNSAFE (Coliform Present) and: □ Fecal/E coli Present □ Fecal/E coli Absent □ Fecal/E coli Absent □ Mitrate: □ mg/L as N □ Lead: □ μg/L □ Arsenic: □ μg/L □ Date/Time Received:	☐ RO Sys	tem							
Homeowners package \$100 (Includes Bacteria, Nitrate, Lead, Arsenic)   Other     Payment Method:   Laboratory Results     Cash   Check   BILL     Credit Card   Check #	☐ Other:								
Nitrate, Lead, Arsenic   Other   If rush, additional fees will apply					_ ` ` ` ` '				
Payment Method:  Cash Check BILL  SAFE (Coliform Absent)  La Crosse County Health Laboratory 300 4 <sup>th</sup> St N, La Crosse WI 54601 Lab Cert # 013  Nitrate:		OFFICE USE ON	LY	-			<b>7100</b> (melades	, Bacteria,	
Payment Method:  Cash Check BILL  SAFE (Coliform Absent)  UNSAFE (Coliform Present) and:  Eactor # 013  Nitrate:						, ,			
□ Cash □ Check □ BILL □ Credit Card Check #				If rus	_	nal fees will apply			
□ Cash □ Check □ BILL □ Credit Card Check #		Payment Metho	d:			Laborator	v Results		
□ Credit Card Check #	□ Cash	☐ Check	□BILL	Bac	teriologi		•		
2.5% fee applied to credit card transactions  La Crosse County Health Laboratory 300 4 <sup>th</sup> St N, La Crosse WI 54601 Lab Cert # 013    Date/Time Received:									
La Crosse County Health Laboratory 300 4 <sup>th</sup> St N, La Crosse WI 54601 Lab Cert # 013  Nitrate: mg/L as N Lead: µg/L Arsenic: µg/L Date/Time Received:				_	•				
300 4 <sup>th</sup> St N, La Crosse WI 54601 Lab Cert # 013  Nitrate: mg/L as N Lead: μg/L Arsenic: μg/L Date/Time Received:									
Nitrate:mg/L as N	•								
Nitrate: mg/L as N Lead: µg/L Arsenic: µg/L  Date/Time Received:	300 4				☐ Fecal/E coli Absent				
Lead: µg/L Arsenic: µg/L  Date/Time Received:	Lab Cert # U13			Nit	Nitrate: mg/L as N				
Arsenic:µg/L  Date/Time Received:									
Date/Time Received:									
				Ar	Arsenic:µg/L				
Lab Sample Number: Date/Time Reported:				Dat	Date/Time Received:				
	Lab Sample Number:			Dat	Date/Time Reported:				