

# 17025 Laboratory-Testing EDITION

Facility

Cantech Bio

ConformanceWare Edition **Laboratory Edition - v4.5** 

Seria

CBL-06082022-00182



## **Laboratory Management System - Testing**

# **COC - PRIV - F Chain of Custody (COC) for Private System Test Request. Use only one form per sample.**

| 824 - 18th St, #3, Brandon, MB R7A 5B7 Rev   |  |   | Revisi   | on Leve   | el: R                                       | elease                                       |                                | Date:  | 05/05/2023  |
|--|--|---|--|---|---|--|--------------------------------|--|---|
| T: 204-727-3524  |  |   |  |   |   |  |                                |  |   |
| By completing this form given in the link below a details see the link: Qui used with: O-RT Document over the SPECIFIC SPALLOON OR DROP DETAILS OF THE SPALLOON OR DROP | and that you agreated that you agree of the control | ee to our to<br>king Water<br>g and Trac<br>OID DEL<br>I YOUR M | erms and co<br>Sample Co<br>ceability. OI<br>AYS FOR H<br>OUSE THE | onditions<br>ollection<br>NLY SEC<br>OMEOW<br>N CLICK | that a Seco CTION NER, MOU                  | ne displand Edition  IS A,B a  REALT  ISE TO | ayed oon Upo<br>and/o<br>OR OF | n our webs<br>dated (epa.<br>r C TO BE<br>R COMPAN | ite. Collection<br>gov). To be<br>COMPLETED<br>Y. HOVER |
| Lab use only<br>Specimen #   |  |   |  |   | Lab Use Only<br>Date and Time<br>YYYY-MM-DD |  |                                |  |   |
| SECTION A. (A) AI  | ND (C) IS ONLY F   | OR REAL E   | STATE SALE   | S. NOTE   | : BANK                                      | (S REQU                                      | IRE FU                         | JLL ADDRES   | SS DETAILS  |
| Client Information   |  |   |  | neowner   |   |  | Sample delivery person         |  |   |
| First Name   |  |   |  | Last Name   |   |  |                                |  |   |
| Real Estate Firm   | REMAX  | REMAX Century 21  |  |   | Royal le Page                               |  |                                | 3% Sutton Realty                                   |   |
| Real Estate Hilli  | Other (Agent   | Other (Agents Only):  |  |   |   |  |                                |  |   |
| Phone  |  |   |  |   | Fa  | ıx   |                                |  |   |
| Street or Civic Address of the water sample  |  |   |  |   |   | Postal                                       | Code                           |  |   |
| Email for person who receives test results   |  |   |  |   |   |  |                                |  |   |
| Signature (1/2)  |  |   |  |   |   |  |                                |  |   |
| SECTION B SECTION (B) & (C) IS ONLY FOR PRIVATE HOMES, COMPANIES AND FARMS   |  |   |  |   |   |  |                                |  |   |
| First Name   |  |   |  | Last Name   |   |  |                                |  |   |
| Phone  |  | Fax   |  |   |   | mpany  |                                |  |   |
| Street or Civic Address of the water sample  |  |   |  |   |   | Postal                                       | Code                           |  |   |
| Email for person who receives test results   |  |   |  |   |   |  |                                |  |   |
| Signature (1/2)  |  |   |  |   |   |  |                                |  |   |



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### **Laboratory Management System - Testing**

#### **SPECIMEN #**

#### SECTION (C) TO BE COMPLETED BY EVERYONE All persons must fill this section below.

| Sample Collector's Nar   | <mark>ne</mark>                         |                  |   |                         |                    |  |  |
|--|---|------------------|---|-------------------------|--------------------|--|--|
| Delivered to Lab by Nar  | ne                                      |                  |   |                         |                    |  |  |
| Source of Water<br>(check all that apply)  | WELL                                    |                  | KITCHEN TAP   | OUTSIDE TAP             | INSIDE             |  |  |
|  | • | 3                | POOL  | WATER PURIFIER          | OTHER:             |  |  |
| Collection Da  |   |                  | NOTE: Remember to tra   | nsport vour sample in a | cooler with an ice |  |  |
| yyyy-mm-   | aa                                      |                  | pack to keep it cool. Holding times are 22 hours maximum after collection to be accepted. (5:00 pm - 5:00am - 3:00 pm are valid collection times) |                         |                    |  |  |
| Collection Tir   | ne                                      |                  |   |                         |                    |  |  |
| Report Delivery Method   | Email                                   | Email Address    |   |                         |                    |  |  |
|  | od Mail                                 | Mailing Address  |   |                         |                    |  |  |
|  | Fax                                     | Fax Number       |   |                         |                    |  |  |
| <b>REQUIRED TESTS INCLUDING GST</b> P/A = Presence/Absence , MPN = Quantification (*TC/EC means Total coliform & E. coli), (*HPC = Heterotrophic Plate Count), (*Pseud = Pseudomonas aeruginosa) |   |                  |   |                         |                    |  |  |
| Private water systems (TC/EC*) Method: SM 9223B (IDEXX Colilert) \$30 Full Chemical \$185  |   |                  |   |                         | 35                 |  |  |
| Pseud*: pools /Hot   | Tubs. Method: SM                        | 1 9213G (IDEXX P | seudalert) \$65   | Basic Chemical \$50     |                    |  |  |
| Lead and HPC*: For any source of water especially water purification systems, feed troughs, bee farms, any copper \$110 farm. The enzyme substrate multiwell method: 9215E (IDEXX HPC) \$52      |   |                  |   |                         |                    |  |  |

| Signature ( | (2/2) | ): | Date |
|-------------|-------|----|------|
|             |       |    |      |

| FOR LABORATORY USE ONLY  |             |       |               |                    |     |                       |  |
|--|-------------|-------|---------------|--------------------|-----|-----------------------|--|
| NOTE: Samples that are not kept between and 1-10 °C may be non-acceptable for proper testing |             |       |               |                    |     |                       |  |
| Sample Received Da   | te          |       | Time Received |                    | ,od |                       |  |
| yyyy-mm-c  | ld          |       |               |                    | reu |                       |  |
| Sample Received E  | Ву          |       |               |                    | Sar | mple Temperature (°C) |  |
| Date of Processir<br>yyyy-mm-c   |             | Time  |               | Time of Processing |     |                       |  |
| CONFORM  | NON-CONFORM | Appro | ved By:       |                    |     |                       |  |

**DISCLAIMER:** Cantech Bio Laboratory does not provide advice or consultation with respect to test results. Please contact The Manitoba Stewardship Office of drinking Water at 204-945-5762

**Liability Waiver:** In no event shall Cantech Bio or its partners, employees, agents or affiliates be liable for damages of any kind including, without limitation, any direct, special, indirect, punitive, incidental or consequential damages including, without limitation, any loss or damages in the nature of or relating to lost business or lost profits arising from your use of or reliance upon any test performed by Cantech bio regardless of the cause and whether arising in contract (including fundamental breach), tort (including negligence), or otherwise. By signing this form you have read and understand the conditions set out above.

