



San Joaquin County
Public Health Laboratory
1601 E. Hazelton Avenue
Stockton, CA 95205
ELAP # 1892
(209) 468-3460

LABORATORY USE ONLY	
LABORATORY NUMBER	DATE RECEIVED

Submitter Information	Sample Location Information
Agency: _____	Sample Location: _____
Address: _____	Sample Point: _____
City: _____ State: _____	Name: _____
Zip: _____	Street: _____
Phone number: _____ FAX: _____	City: _____ State: _____ Zip: _____
Collected By: _____	Sample Identification Number: _____
Chlorine: _____ pH: _____	Date Specimen Taken: _____ Time: _____

WATER TYPE INFORMATION

- Potable Water Potable Water, Private Public Other
 Routine Duplicate Specimen for Compliance Source

TEST(S) REQUESTED

- Total Coliform/E. coli Qualitative (Colilert)

FOR LABORATORY USE ONLY

Set Up Initials: _____ Date/Time Started: _____
Reporting Initials: _____ Date/Time Reported: _____

WATER TESTING RESULTS

- Total Coliform Absent (Colilert)
 Total Coliform Present (Colilert)*
 E. coli Absent (Colilert)
 E. coli Present (Colilert)*

Water temperature (Batch) upon receipt (°C) : _____

I attest that all testing has been documented on the appropriate QC logs, using controls, kits, reagents and equipment that have met the San Joaquin County Public Health Laboratory Quality Control requirements.

Analyst Initials: _____

Office Staff Initial/Date: _____

Supervisor/ Senior Initial/Date: _____

Updated 02.12.2023 AN

* Positive results require immediate notification to submitter

** Batch is defined as: Any group of water samples received at the same time and transported under the same conditions.