



**Sampling Instructions: *Escherichia coli* in Recreational Water**

Please remember to provide the information requested on the next page of this form.

1. Samples are accepted for analysis on Monday through Thursday from 8:00 a.m. to 4:00 p.m. If you need a next day shipping label from us, please add an extra \$10 to the actual fee of \$36 required for the laboratory test. Please make checks out to UGA-FEW Lab. Payment is due upon receipt of sample unless prior arrangements are made.
2. Samples must be accepted for analysis within 24 hours of the collection time. Therefore, collect and ship samples on the same day. If using overnight shipping, please collect and send samples on Monday through Wednesday only.
3. Provide the information requested on the opposite side of the form.
4. Select the appropriate sampling area needed to obtain a representative sample for the recreational use of the water. If you need help selecting a sampling location, contact your county extension agent or the FEW Laboratory.
5. Uncap the sample bottle without touching the inside of the cap or bottle, collect the water sample by holding the bottle near its base and plunging it, neck downward, below the surface. Turn bottle until neck points slightly upward and mouth is directed toward the current. If there is not current, create a current artificially by pushing the bottle forward horizontally in a direction away from hand. Collect the samples approximately 0.3 m or 1 ft below the water surface.
6. The white substance in the bottle is a dechlorinating agent. Please do not rinse the bottle.
7. It is best to take samples during a range of environmental and climatic conditions, especially during times when maximal pollution occurs.
8. Place sample in the same box, seal sample box, affix UPS shipping label and call UPS at 1-800-742-5877 to determine your local pick-up/drop off place and time for "Next Day Air" packages. Or hand deliver to the Ag Services Lab, 2300 College Station Rd, Athens.



**Submission Form: *Escherichia coli* in Recreational Water**

Instructions for collecting and delivering the sample are on the previous page of this form.

<b>County Extension Office:</b>	<b>Sample Location (if different from client address)</b>
<b>Signature of the county employee:</b> (Needed if submitted through the county extension office)	County:
<b>Client Information</b>	Address:
Name:	City, State, Zip:
Address:	<b>Lab use only</b>
City, State, Zip:	Lab # FEW:
Phone:	Date/Time Received:
Fax:	Carrier:
Email:	Accept/Reject (A / R):
<b>Sample Information</b>	Paid (Y / N):
Date/Time Sampled:	Special Notes:
Sample ID:	Date/Time Analyzed:
Type of Surface Water (Pond,Stream,etc):	<b>Results (MPN/100mL):</b>
Sampler's Name:	<i>Escherichia coli</i> :
Comments:	