

Please store sample at < 10 °C (do not freeze) and deliver within 24 hours.



Drinking Water Sample Submission Form

Civic Address: 77 C. Saulnier Road, Saulnierville, Digby Co., NS
Mailing Address: P.O. Box 39, Saulnierville, NS, B0W 1M0
Tel: (902) 769-2102; **Fax:** (902) 769-2104; **Email:** info@novawestlab.ca

Sample ID: _____

Resident / Contact Person		Property Information	
CONTACT NAME		FACILITY NAME (if applicable)	
MAILING ADDRESS		CIVIC ADDRESS	
PHONE	FAX	PHONE	FAX
EMAIL ADDRESS		EMAIL ADDRESS	

Drinking Water Category	Payment Information (if applicable)
<input type="radio"/> Approved <input type="radio"/> Registered (Reg #) _____ <input type="radio"/> Commercial <input type="radio"/> Residential <input type="radio"/> Government	
Drinking Water Source	Analysis Requested (verify available analysis with lab)
<input type="radio"/> Municipal <input type="radio"/> Drilled Well <input type="radio"/> Dug Well <input type="radio"/> Lake <input type="radio"/> Reservoir <input type="radio"/> Spring <input type="radio"/> Cistern <input type="radio"/> Watercourse <input type="radio"/> Other: _____	<input type="radio"/> Total Coliform Presence / Absence <input type="radio"/> E. coli Presence / Absence <input type="radio"/> Total Coliform Count <input type="radio"/> E. coli Count <input type="radio"/> Other: [i.e.: Faecal Coliform Count. HPC] _____ For chemical analysis packages refer to NWL Chemical Sample Submission Form
Other Water Source	
<input type="radio"/> Beach: salt / fresh <input type="radio"/> Wastewater System: effluent / sewage <input type="radio"/> Other: _____	

Detailed Sample Information	For laboratory use only
SAMPLE COLLECTION LOCATION (e.g. kitchen tap)	SAMPLE TEMPERATURE AT RECEIVING >>> _____ °C
<input type="radio"/> Raw <input type="radio"/> Treated (type) _____ (if available) Chlorine Residual: _____ mg/L free / total pH: _____	COMMENTS REGARDING SAMPLE:
SAMPLE COLLECTED BY (print)	
DATE & TIME OF COLLECTION (dd / mm / yyyy hh:mm)	

Form Completion Instructions

The following instructions detail information requirements for each box of the Drinking Water Sample Submission Form:

<p>Resident / Contact Person – Provide details for business and/or primary contact person for sampled facility or residence. This business/person is designated to receive analysis results.</p> <p>Property Information – Provide details on organization facility or residence where sample was collected.</p> <p>Drinking Water Category – Choose one descriptor for drinking water category. Approved and Registered facilities are regulated by Nova Scotia Department of Environment and Climate Change.</p>	<p>Payment Information – DO NOT write any personal financial information on this section. Verify payment arrangements with receiving personnel and information will be filled out accordingly.</p> <p>Other Water Source – Complete this section only if analysis is not for drinking water. DO NOT complete Drinking Water Category or Drinking Water Source boxes if filling this section.</p> <p>Detailed Sample Information – Provide all available sample information on this section.</p>
---	---

SIGNATURE OF RESIDENT/CONTACT PERSON

SIGNATURE OF SAMPLE COLLECTOR

DATE/TIME (dd/mm/yyyy hh:mm)

SIGNATURE OF LAB PERSONNEL UPON RECEIPT

DATE/TIME (dd/mm/yyyy hh:mm)

Refer to the back of the form for sampling instructions.

Please store sample at < 10 °C (do not freeze) and deliver within 24 hours.

¹ Sampling Instructions for Bacteriological Analysis of Drinking Water

Container

1. Use a sterilized sample bottle with added sodium thiosulfate preservative (white particulates that neutralizes chlorine). Bottles may be available from Nova West Laboratory, Comeau's Seafoods Stockroom, NSD Environment and Climate Change offices, and/or from some water quality and hospital laboratories.
2. Keep sample containers clean and free from contamination before and after collecting the sample.
DO NOT open prior to collecting the sample.
3. Examine the sample bottle for cracks, a missing seal, and/or other signs that sterility may be compromised. If any indications are found, discard the bottle and use a suitable one.

Flush the System

4. If sample must be collected from a tap, inspect the exterior of the faucet. If water leaks around the outside of the faucet, select a different sampling site.
5. Remove any aerators, strainers, attachments, or purification devices from the tap.
6. If necessary, swab the faucet outlet with a disinfecting wipe to remove debris.
7. If the sample is to be taken from a tap or a pump, allow cold water to run for 5-10 minutes before collection. This will help to remove stagnant water from the distribution system.

Collect the Sample

8. Where appropriate, measure and record chlorine residual (free or total). **DO NOT** rinse the bottle. Make sure the collector washes their hands thoroughly prior to collection.
9. While holding the sample container at the base, remove seal around cap before opening the bottle.
10. Remove the cap with the free hand. **DO NOT** touch the inside of the bottle or bottle neck. Continue to hold the cap in one hand with the inside facing down while the bottle is being filled. **DO NOT** touch the interior of the cap or lay it down. **DO NOT** breathe on the bottle or cap.
11. Before sampling, reduce the tap flow rate enough to ensure that no splashing occurs as the container is filled. Collect the sample directly into the sterile bottle; do not use a dipper or pail. At sampling points where the water runs continuously, do not adjust the flow rate. **Fill bottle above fill line ensuring there is 100mL or more.** **DO NOT** allow bottle to overflow.
12. It is very difficult to obtain a sample from a well or spring without a pump without contaminating it during collection, please be aware when using this method. Tie a sanitized wire or string around the neck of the bottle and lower it beneath the surface.
13. Complete the laboratory submission form.

Storage and Transport

14. The sample must be refrigerated immediately after collection and store at < 10°C (do not freeze).
15. When using a cooler/bag for storage, ensure that it is sanitized and free from debris.
16. Check lab day and time deadlines for sample acceptance to ensure meeting the 24-hour criterion. Transport the sample to the laboratory as soon as possible and within 24 hours of collection.

¹ Based on the Nova Scotia Department of Environment and Climate Change – *Test your well water* (Refer to website: <https://novascotia.ca/well-water-testing/>)

Water samples are accepted Monday – Friday between the hours of 9AM – 3PM at **Nova West Laboratory Ltd.**

If samples cannot be delivered to the lab between these hours,
please call (902) 769-2102 to check for other arrangements.

Water samples are not accepted on the day before a holiday and during holiday closures.