

GARRETT GUILLOZET, MPA, REHS | HEALTH COMMISSIONER
 470 SOUTH SANDUSKY STREET | DELAWARE, OHIO 43015
 PHONE: (740) 368-1700 FAX: (740) 368-1736 | DELAWAREHEALTH.ORG

WATER SAMPLE REQUEST FORM

The Delaware Public Health District performs testing of drinking water for homeowners and private water supplies through laboratory analysis. Standard testing for a new private water system (PWS) includes a field analysis of Nitrites/Nitrates, presence of Chlorine, total coliform, and Escherichia coli (E.coli) when necessary.

If you wish to have your water tested, print and fill out this form and send to the **Delaware Public Health District, 470 S. Sandusky Street, Delaware, Ohio 43015.**

After receiving the completed form and payment, an environmental health specialist will contact you to arrange a time for sampling. Samples can only be collected on Wednesday afternoons or Thursday mornings.

Please fill out the following application so that we may better serve you in this process.

- Existing PWS; Standard testing \$116.65
- Existing PWS; Special Sampling (*Please speak with an EH specialist for pricing and availability*)

Please make checks payable to: **Delaware Public Health District.** For any additional sampling other than standard testing as outlined in the paragraph above, please call 740-368-1700 for pricing.

Type of PWS Well Spring Cistern Pond

Property Owner Name: _____

Property Address: _____

City: _____ State: _____ Zip: _____ Township: _____

Phone: _____ Email: _____

Requestor Name: _____

Requestor Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

I agree that I have read the above and will submit my fee accordingly.

Signature: _____ Date: _____

-----OFFICE USE ONLY-----

EH Specialist: _____ **Date Scheduled:** _____ **AR#:** _____

EH Specialist Fee Breakdown: _____

Receipt #: _____ **Receipt Date:** _____ **Received by:** _____