# Tasmanian Government Logo Document No. 04 (01 Jul 22)

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Page 1 of 1

# **Request for Bacteriological**

# **Analysis of Shellfish Lease Water**

**Customer:** TSQAP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Sampled:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Details *(new customers or updates only)*** **Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Time Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Purchase Order: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Sampling Officer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tel:** (03) 61660690 Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Reason for Analysis: | | |  | TSQAP Survey | |  | Effluent/Sewage Spill |
|  | |  |  | |  |
|  | | | | | |  | |
| **Tide Stage (use below):** | | | | | | **Wind Direction (use below)** | |
|  |  | | **1** | Low Rising | | **1** | North |
|  |  | | **2** | Mid Rising | | **2** | North-East |
|  |  | | **3** | High | | **3** | East |
|  |  | | **4** | Mid Falling | | **4** | South-East |
|  |  | | **5** | Low Falling | | **5** | South |
|  |  | | **6** | Low | | **6** | South-West |
|  |  | |  |  | | **7** | West |
|  |  | |  |  | | **8** | North-West |
|  |  | |  |  | | **9** | Calm |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sample Site | **Site No.** | **Time** | **Tide** | **Wind** | **Temp. (°C)** | **Salinity** |

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| **Requested Testing** | | **X** | Thermotolerant Coliforms |  | Coliforms |
|  |  | **X** | *E. coli* |  | Heterotrophic Colony Count |
|  | MPN or CFU (if required) |  | Enterococci |  | \* Marine Colony Count |

\* Test is not NATA-accredited

**Comments:**