

**MICROBIOLOGICAL ANALYSIS REQUEST**

**Water / Steam Analysis**

<b>CUSTOMER:</b>			
<b>SUBMITTED BY:</b>		<b>PURCHASE ORDER NUMBER</b>	
<b>DATE:</b>			
SAMPLE DETAILS			FINAL RINSE?
<b>HTM 01-01 Part D</b> <span style="float:right">Sample Point:</span> <div style="display: flex; justify-content: space-around;"> <span>Microbiology</span> <span>Chemistry</span> </div> <ul style="list-style-type: none"> <li>• R.O. treated <input type="checkbox"/> <span style="margin-left: 100px;"><input type="checkbox"/></span></li> <li>• Deionised <input type="checkbox"/> <span style="margin-left: 100px;"><input type="checkbox"/></span></li> <li>• Softened only <input type="checkbox"/> <span style="margin-left: 100px;"><input type="checkbox"/></span></li> <li>• Untreated <input type="checkbox"/> <span style="margin-left: 100px;"><input type="checkbox"/></span></li> </ul>			
<b>HTM 01-01 Part C</b> <span style="float:right">Sample Point:</span> <div style="display: flex; justify-content: space-around;"> <span>Microbiology</span> <span>Chemistry</span> </div> <ul style="list-style-type: none"> <li>• Clean Steam Condensate <input type="checkbox"/> <span style="margin-left: 100px;"><input type="checkbox"/></span></li> </ul>			
<b>HTM 01-06 Part E</b> <span style="float:right">Sample Point:</span> <ul style="list-style-type: none"> <li>• TVC 2 &amp; 5 Day <input type="checkbox"/></li> <li>• Hardness <input type="checkbox"/></li> <li>• pH <input type="checkbox"/></li> <li>• Conductivity <input type="checkbox"/></li> </ul>			
<b>LAL testing required?</b>		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Pseudomonas Aeruginosa testing required?</b>		Yes <input type="checkbox"/>	No <input type="checkbox"/>

**N.B.** Please ensure that all the sample information is within the respective box, and that one form is provided per sample submitted.

<b>OTHER INFORMATION</b>	
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<b>CONTACT NAME</b>	<b>TELEPHONE No.</b>	
<b>CONTACT EMAIL</b>		



Version: a

Approved by: *[Signature]*

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