INDIANA DEPARTMENT OF HEALTH

Collector's Contact Information

DOH SDG:	
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ENVIRONMENTAL LEAD LABORATORY – LEAD IN DRINKING WATER SUBMISSION

Sampling Information

Organization: *		Date San	npled: *		
Address (1):		Property	Address (1):*		
Address (2):			Address (2):		
City, Zip Co	de:	City, Zip	Code:		
Phone:			d By:*		
Email for Results:* Assessor License #:					
Email for Results:		Well Wa	ter:*	Yes 🔘	No 🔘
Email for Results:		Low Prio	rity?	Yes O	No O
*Required Fi	ields	If well water	, sample will be tested for	Arsenic	
YOUR SAMPLE ID	SAMPLE DESCRIP	SAMPLE DESCRIPTION INCLUDING DRAW AND LOCATION			ssigned Number
EPA	Drinking Water Maximum	Contaminant Limit Goal for Lead: Zero	EPA Action	Limit for Lea	d: 15 ug/L
Laboratory @ Use of this form co	317-921-5500 onstitutes a contract between the	na Lead and Healthy Homes Division @ submitter and the IDOH Laboratories. The Labora 10 business days, low priority turnaround	atory will test samples acco	rding to its EPA L	aboratory
Please mail sa	imples with this form to:	IDOH Environmental Lead Labo 550 W 16 th Street Indianapolis, IN 46202	oratory		
Custody Sigr	nature: Relinquished By:		Date/Time	<u> </u>	
Custody Signature: Received By:			Date/Time:		

