

Surface Water Sampling Request Form

(Please print. Complete entire form to avoid a delay.)

Please Select One:

Bathing Beach Other Surface Water (stream, creek, etc.): _____

Sample Collection Address:

Parcel / Tax ID #: _____
Street Address: _____
City, State & Zip: _____ City/Village/Township: _____

Contact Information

Name: _____ Contact Phone #: _____

Please send results to:

check here if same as above

Name: _____
Street Address: _____ Apt or Suite #: _____
City: _____ State: _____ Zip Code: _____
E-mail (optional): _____

Sample(s) Requested:

Samples analyzed by KCHCS Lab

\$48.00 (\$16.00 x3 for Bathing Beach Bacteriological Sampling)

Fee Total:

_____	Total Sample Cost from Above
+ \$90.00	Sample Collection Fee
<input type="text"/>	Total Cost (cash, check, VISA or Mastercard) Please make checks payable to KCHCS

Payment can be made with cash, check (payable to *Kalamazoo County Health & Community Services Department*), or credit card. **Credit Card Payment:** For secure payment, submit the **Credit Card Authorization Form to Kalamazoo County Environmental Health by FAX or MAIL only.** Please return this form with payment to:

By Mail: Kalamazoo County Health & Community Services Department
Environmental Health – 311 East Alcott Street, Kalamazoo, MI 49001

By Fax: 269-373-5333

By E-mail: ehincoming@kalcounty.com

Applicant's Signature: _____ Date: _____

