

ORDER FORM FOR WATER TESTING

PLEASE SEND ME TEST KIT(S) FOR THE FOLLOWING:

--- ROUTINE WATER TESTS ---

A () \$30.00 A1 () \$30.00 B () \$58.00 BA () \$70.00 NEW WELL TEST () \$70.00 BF () \$ 77.00 FHA () \$84.00 C () \$110.00

-- SPECIAL TESTS FOR ADDITIONAL WATER QUALITY INFORMATION --

D1 () \$94.00; E1 () \$165.00; E2 () \$154.00; F () \$315.00

MISC () \$20.00; per item (specify items - see page 6 _____)

HG () \$20.00; GS () \$20.00; PB1 () \$20.00

I () \$30.00

ECOLI SWIMMING FRESH ()\$20.00; ENTEROCOCCI SWIMMING ()\$20.00

--- TESTS FOR ORGANIC COMPOUND CONTAMINANTS ---

VOC () \$160.00; TEPHW () \$175.00

SVO () \$240.00; TTHAC () \$100.00; CHLORINATED ACIDS() \$220.00; PCBW () \$165; CARBAM () \$140.00;

SVO/PEST_CL_PCBS () \$305.00

R () _____(specify compound to be tested - contact lab to determine fee)

--- RADIOLOGICAL TESTS ---

RADON WATER () \$30.00; RADON AIR SHORT TERM () \$30.00; GROSS ALPHA () \$60.00;

Please make check or money order payable to TREASURER OF STATE. Send to: HEALTH AND ENVIRONMENTAL TESTING LABORATORY 221 STATE ST., STATION #12, AUGUSTA, ME. 04333. Do not send cash or stamps. For your convenience, payment may be made by VISA OR MASTERCARD.

Form for card payment details including Visa/MC selection, Card Number, Expiration Date, and Amount.

Signature of Card Holder NAME _____

STREET _____

TOWN _____ ZIP _____

Telephone _____ Location of water supply (town) _____

FEE WAIVERS

Free water testing may be available if you meet both (1.) and (2.) below:

- 1. Food Stamp Eligible (Please provide Food Stamp ID) or demonstrate other proof of financial need or if you have already spent \$150.00 on water testing at a state certified lab.
2. There is written professional justification to support the need to test this Private Water Supply. Examples are: Doctor's letter, Dept of Env. Prot. Recommendation, geologist.