



ZooQuatic

Laboratory, LLC

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ZQ Lab Use Only

ZQ Accession:

Date Received:

WATER QUALITY LAB SUBMISSION FORM

Client/Owner Information

Organization:

Contact Name:

Address:

Preferred Results

Reporting (email or fax):

Phone:

Invoicing Contact:

Sample Submission Information

System ID:

Project ID/Name:

Sample Matrix:

Collection Date/Time:

Sample Containers (#/Volume):

Medications, if any:

Test(s) Requested

Panels:

Basic Panel (*ammonia, alkalinity, pH, nitrite, salinity*)

Basic Panel + Phosphate

Basic Panel + Nitrate

Basic Panel + Phosphate/Nitrate

Coral Panel (*salinity, pH, ammonia, nitrite, alkalinity, calcium, phosphorus*)

Individual Tests:

Salinity

pH

Alkalinity

Calcium

Nitrate

Phosphate

Iron

Copper

Chloroquine

Bacteria Monitoring:

Coliforms (MPN) Total, E. coli

Enterococcus (MPN)

Heterotrophic Plate Count for total bacteria

Other/Notes: