the Minster VETERINARY PRACTICE

Poultry Directors: A. Johnston BVMS, Cert VA, MRCVS M. I. Clark MA, VetMB, MRCVS
K. Warner BSc(Vet.Sc) Hons, BVM&S, MRCVS. S. Perez DVM, MS, CertPMP, MRCVS
Associate: R. Jennison BVM&S, CertLAS, CertWEL, MRCVS
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Water Analysis Submission Form

Client's name and address:

Postcode:

Tel:

Account Payable By:

Report to:

☐ Fax: ……

☐ Email: ……

Address where birds kept, if different from above:

☐ Post: (If different from other addresses) ……

Postcode:

Postcode:

Required Information:

Date of Sampling:		**Species/Type of bird:**	
Age of Birds:			

Please label the water containers 1-6 and fill in the sample area information below against the corresponding number.

Sample	House	Area Sampled	Sample	House	Area Sampled
1.			4.		
2.			5.		
3.			6.		

Analysis Required: Full Bacteria Profile ☐ Total Viable Count (TVC) ☐ Mineral Profile* ☐

* Please fill 6 containers per point sampled for the mineral profile test.

Samples should be sent to the Minster laboratory at the Salisbury Road address below, within 48hrs of collection, but avoid posting on a Friday or Saturday. If there is a delay, please refrigerate between 2-8°C. Do **not** freeze the samples. Sampling instructions are available on request.

Please send me _____ replacement water sampling kits:

The Veterinary Surgery
Salisbury Road
York
YO26 4YN
Tel: 01904 620968
Fax: 01904 671397

Herriot House
Howton
Hereford
HR2 0BG
Tel: 01981 241320
Fax: 01981 241 321

College Road
Sutton Bonington
Loughborough
LE12 5RA
Tel: 01159 516551
Fax: 01159 516550