



**TASMANIAN
LABORATORY
SERVICES**
Quality is in our DNA

Factory Hygiene / Swab Request Form

CONTACT INFORMATION	
Company:	
Address:	
Contact:	Collected by:
Phone:	Fax:
Email:	
Reference:	
Purchase Order No:	Account to:
Copies to:	
Reports forwarded by (please tick): Fax <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/>	

Rec'd at TasLab by:
DATE:
TIME:
TEMP:
CONDITION:
SAMPLE DESCRIPTION:

Sample No.	Sample Description	Date	Time	Standard Plate Count	Salmonella	Listeria	E. coli	Coliforms	Yeast & Mould	Coag. Pos. Staph.	Bacillus cereus	Composite	Other (please specify)
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
OFFICE USE ONLY		W996		W230 NAP W225 Petrifilm	W447	W445 W446 Mono	W230	W250 QC W245	W080 QC W261 W262	W070 QC W351	W375 QC W370	W982	SINGLE SWAB FOR MULTIPLE TESTS ADD W001