	Massachusetts State Public Health Lab 305 South Street Jamaica Plain, MA 02130	Document Number/Name FD 5.8.01 F# 1 ENVIRONMENTAL SAMPLE SUBMISSION FORM			Page 1 of 2	
					Type: Location: Food Lab	Ver: .12
		Implementation Date: 11/26/14	Version Effective Date: 3/14/16	Removed from service date: m/d/yy	Issuing Authority: Microbiology Division Director	

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Reason For Test: ☐ Outbreak ☐ Complaint ☐ Surveillance ☐ Routine ☐ Salvage ☐ Embargo (tag#) ☐ other

Test(s) Requested: _____

Select one: ☐ Specimen(s) will be destroyed in _____ days after testing is complete ☐ Hold specimen(s) until contacted by: _____

Event Code:	Outbreak Code:
Other Codes:	
Complaint #:	Maven ID:
Name/address where sample was collected	
Organization Name:	
Address:	
Date of Collection:	
Contact Person:	
Phone Number:	
Condition upon collection:	
Detailed sample handling:	


Collector Information
Organization Name:
Address:
Contact Person:
Phone Number:
Detailed sample handling: <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen <input type="checkbox"/> On ice <input type="checkbox"/> Room Temperature <input type="checkbox"/> Other

Relinquished By:	Print:	Sign:	Date/Time:
Received By:	Print:	Sign:	
Comments:			

Relinquished By:	Print:	Sign:	Date/Time:
Received By:	Print:	Sign:	
Comments:			

Relinquished By:	Print:		Sign:	Date/Time:
Received By:	Print:		Sign:	
Comments:				

SAMPLE LIST ON PAGE 2

	Massachusetts State Public Health Lab 305 South Street Jamaica Plain, MA 02130	Document Number/Name FD 5.8.01 F# 1			Page 2 of 2	
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Event Code: _____

Collection Location: _____

		For Inspector Use Only	For Lab Use Only	
Inspector #	Sample Description (include lot #, date code and type of container)	Sample Temperature at of collection	Lab #	Arrival Temp/ Gross Weight

If necessary add additional pages and change the page # at the top of the additional lines pages. Date an initial the page # change. Ensure there the Event Code and Collection Location are at the top of each additional page.

<input type="checkbox"/> See Attached Narrative Form
<input type="checkbox"/> See Attached QA 4.9.1.1 F#1 Laboratory Sample / Specimen Rejection /Concession Form