

# LHAAC SAMPLING SCHEME – SAMPLE SUBMISSION FORM

SELECTED ANALYST	(Please Tick)	LAB USE ONLY Consignment Number:
AgriFood Technology		
Analytical Reference Laboratory		
ChemCentre (water samples only)		

NAME OF LGA: .....

Tel: .....

Food Vendor: .....

Address: .....

Sold By: ..... Position: .....

Tel: .....

Date: ..... Time: ..... (am/pm)

LGA Sample Number	Sample Type (CS,DS,NC)	Legal Sample (Y/N)	Cost	Weight	Label Description	Sample Details (Brand/Manufacturer/Importer/Use By/Batch No.)	Analysis Required

**Legend:** CS: Coordinated Sampling Project DS: Discretionary Sample NC: Non-Compliant Sample

Special Instructions

EHO: .....

(Please Print Name)

.....

(EHO Signature)

EHO Email: .....

(EHO email address)

WITNESS: .....

(Please print name & signature)

Received From EHO: .....

(Please Print Name)

Received By: .....

(Please Print Name)

Date: ...../...../.....

Time: ..... (am/pm)

Prosecution Certificate Required: YES  NO