



ENVIRONMENTAL HEALTH SERVICES
QUEEN ANNE'S COUNTY
DEPARTMENT OF HEALTH

206 N. COMMERCE STREET
CENTREVILLE, MARYLAND 21617
410-758-2281(P) 410-758-6602 (F)

APPLICATION FOR WATER SAMPLE

Please complete this form and return it with a check made payable to Queen Anne's County Department of Health for the amount listed below. If you should have any questions, please call 410-758-2281. Some of the information which is requested you may obtain from your tax bill.

Date of Application: _____

Tax Map: _____ Grid: _____ Parcel: _____ Lot: _____

Subdivision: _____ Section: _____ Block: _____

911 Property Address: _____

Directions to the property: _____

Well Tag #: _____

Type of Water Treatment Equipment: _____

Outside Faucet Location: _____

Property Owner: _____

Owner's Address: _____

Owner's Home Phone: _____ Cell Phone: _____

Person Requesting Water Test: _____

Fees must accompany application.

TEST REQUESTED:

_____	\$20.00	Bacteriological Sample
_____	\$40.00	Chemical Sample or Fluoride Sample
_____	\$40.00	Arsenic

Date Collected: _____ by: _____
(collector)