

Heavy Metals Shellfish Submission Form

Customer Name			Email Report to											Cawthron Labs			
Address			Copies to										Sample Reception 98 Halifax St East Nelson 7010				
Reference			Email Invoice to									Ph: 03 548 2839					
Order No.			Contact /	ne							Email: samples@cawthron.org.nz						
Samples collected by:				Signed:								Lab Use Only Certified Sampler			YES / NO		
Note for Sample	rs																
Please provide 12-15 shellfish totalling a minimum of 200gms flesh														<u>-</u>	Dr	Numbe	Other (S
Sample Description		Site Code	Date & Time Sampled 24-hour clock	Type of Sample (e.g. Clams, Mussels)	Arsenic	Arsonic	Cadmium	Chromium	Mercury	Lead	Nickel	Zinc	Digestion Fee	Loss on Drying	Drained Weight	Number of Shellfish	Other (Specify below)
Additional Analysis/Furt	her Information	n (Specify Here)						Sam	ple Rec	eption L	Jse Onl	V		Receiv	ed at C	awthron	1:
				Samples received with													
IMPORTANT: If to ation :	diagta which		Use test list NZFSA_FHM Temperature				n Arrive	No									
IMPORTANT: If testing is a regulatory compliance requirement, please indicate whe market(s) or notice this relates to below.						а	and cancel							1			
								Require	ments M No	let?	-						
									Yes			NO					