



FDOH ENVIRONMENTAL LABORATORY WEST PALM BEACH

800 Clematis Street, Room 1155

West Palm Beach, FL 33401

Phone: (561) 822-4553

Email: EPHLaboratory@flhealth.gov

LABORATORY ANALYSIS ORDER FORM

Fees for laboratory services as established in Chapter 11, Article II, Section 11-24 of the Palm Beach County Code

Client Name: _____

Address: _____

Email Address: _____

Phone Number: _____

Sampling

Location(s): _____

(Attach sheet if needed) _____

Analysis	Matrix	Cost per Sample	Number of Samples	Analysis Cost
Total Coliform & <i>E.coli</i> – 24 hour	Drinking Water	\$30.00		
Total Coliform & <i>E.coli</i> – 18 hour	Drinking Water	\$35.00		
Enterococci / Colilert-18 Quanti-Tray	Non-Potable Water	\$50.00		
Sample Collection Site*	Matrix	Cost per Site	Number of Sites	Collection Cost
Recreational Water	Non-potable	\$100.00		
Private residence	Drinking water	\$75.00		

*Attach description and/or sketch of property if requesting sample collection.

Total Cost: _____

Signature: _____

Date: _____

AS PER THE PALM BEACH COUNTY CODE CHAPTER 11, ARTICLE II, SECTION 11-24

The following fees are hereby adopted to supplement the costs of issuing permits, licenses and approvals; performing inspections; reviewing plans and sites; and performing other services in the administration of this article and the Environmental Control Act (appendix G. § 11-21 et seq.). These nonrefundable fees shall be paid to the County Health Department.

For DOH Staff Only	
Fee Code:	_____
Service:	_____
Completed By:	_____
(Fee Codes: Limited Use Public Water System - 57, Public Water System - 58, Private Water System - 59, Coastal Water - 47, Fresh water bathing places / pools - 60)	