



Northwest Bergen Regional Health  
 Commission 20 W Prospect Street  
 Waldwick, NJ, 07463  
 201-445-7217

## Water Testing Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Last First M.I.

Address: \_\_\_\_\_  
 Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Test Parameter	Price	Selection
Volatile Organic Compounds	\$320.00	<input type="checkbox"/>
Coliforms, Total, and E.Coli	\$120.00	<input type="checkbox"/>
Mercury	\$70.00	<input type="checkbox"/>
Nitrate	\$120.00	<input type="checkbox"/>
Chlorine	\$30.00	<input type="checkbox"/>
Arsenic	\$50.00	<input type="checkbox"/>
Lead	\$50.00	<input type="checkbox"/>
Uranium	\$70.00	<input type="checkbox"/>
Gross Alpha	\$400.00	<input type="checkbox"/>
PFOS, PFOA, PFNA	\$700.00	<input type="checkbox"/>
pH	\$30.00	<input type="checkbox"/>
Manganese	\$50.00	<input type="checkbox"/>
Iron	\$50.00	<input type="checkbox"/>
All parameters (bulk pricing)	\$1500.00	<input type="checkbox"/>

Selection Subtotal: \$ \_\_\_\_\_

FOR OFFICE USE ONLY

Sample Drop Off Date: \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_      Sample Pick Up Date and Time: \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_ AM / PM  
(confirm with Eurofins)

Cash Payment Subtotal: \$ \_\_\_\_\_      Check Number: \_\_\_\_\_