Food Sample Collection Report

Alaska Department of Environmental Conservation

Division of Environmental Health

General Information				EHL Lab Folder#:
Permit#/AK#	Establishment/Facility Name		Type of Operation	
Establishment/Facility Mailing Address	City		State	Zip
Physical Location			Person In Charge	
Corporation/Company/Owner	Email		Telephone	

Sample Information and Collection Data

REGULATORY PROGRAM (Required, check one): ☐Ready To Eat (FS&S) ☐Ready To Eat (OSV-CHEESE) ☐HACCP (USDA) ☐Shellfish (FS&S) ☐Other (please specify)_____

REASON (check one): ☐Compliance ☐Special survey ☐Foodborne Illness Investigation (**FBI**):

COMPLAINT#_____ **FBI Type (check one):** ☐Ingredient of suspect food ☐Suspect food ☐Similarly prepared food to suspect food

Date collected: _____Time collected: _____ Sampling Method ☐ Judgment ☐ Random ☐ Other _____

Field ID #	Product Name/Description/Sample Type	Sample Lot #	Temp	Process	Product Form	Packaging/ Container Type	Comments (Production Date or Weight Info)	EHL Sample Number

Analysis Requested (Required, check all that apply)

☐ RTE Panel = Fecal Coliform, Salmonella, Listeria ☐ *RTE Native Style OR Cheese Products = RTE Panel + Staph ☐ *RTE Waterphase Salt (Chemistry) ☐ *RTE Water Activity (Chemistry)

(Min sample requirement is 227 grams (1/2 pound) *** Note: An additional 227 grams (1/2 pound) is required for Staph and Chemistry tests.**

Shellfish Meats (Micro) = ☐ Fecal Coliform ☐ Standard Plate Count ☐ USDA Beef Sponge ☐ USDA N60-*E.Coli 0157*

(Minimum sample requirement must be 200 grams and consist of 12 animals)

☐ Fishmeal (NOAA) ☐ Organoleptic ☐ Can Seam Analysis ☐ Other_____

Comments: Turnaround Time (TAT) ☐Rush ☐Standard

Shipping Information

Shipped: ☐Refrigerated ☐Frozen ☐Ambient Carrier

Investigator/Sampler Name	ID #	Title	Agency
Investigator/Sampler (signature)			Sample Relinquished Date: Time:

EHL Lab Use Only	Receipt Condition:	Receipt Temp:	Comments:
Received by (print name and title)		Received by (signature)	Date: Time: