

## *Get the Lead Out!*



### Lead in Drinking Water Sampling Kit Request Form

Business Name:

Address (for shipping/reporting):

City/State/Zip:

Contact:

Phone Number:

eMail address:

Number of samples required (total of 1<sup>st</sup> and 2<sup>nd</sup> draw):

Anticipated sampling date (scheduled with lab):

Anticipated delivery method:

Save this form to pdf and e-mail it to [gettheleadout@teklabinc.com](mailto:gettheleadout@teklabinc.com) or print the form and mail it to 5445 Horseshoe Lake Rd. Collinsville, IL 62234.

*Collinsville – Springfield – Downers Grove*

Contact: (618) 344-1004 or [gettheleadout@teklabinc.com](mailto:gettheleadout@teklabinc.com)