

Sagescript Institute, Ilc 13651 N 115th St. Longmont CO 80504 info@sagescript.com 303-651-2062

Microbiology Tes	sting Service	s Request			
Be sure to label	your product	s with your	name and	product	name

Date
------

Contact Person			-	
Company Name			_	
Address				
Phone			_	
Email				
Sample identification 1.				
2.				
3. 4.				
5.				
Tests requested:				
☐ Aerobic Plate Co	ount (APC) - e	numeration o	of bacteria	
☐ Fungal/yeast cou☐ Both APC/ FYC	unt (FYC) - en	umeration of	f fungi & yeast	
_ boll Al C/ I TC				
Preservative use (option	nal):			
Additional information: Send check with sample	se or navnal to	v cindv@saa	escript com	
	i -	FYC		]

## Number of Samples APC FYC Both tests 1-2 \$20 \$20 \$33 3-4 \$19 \$20 \$32 5+ \$18 \$19 \$31